

FRESNO STATE - POWERING THE NEW CALIFORNIA



SCHOOL NURSE SERVICES CREDENTIAL PROGRAM

Program Assessment

Kremen School of Education and Human Development

CALIFORNIA STATE UNIVERSITY, FRESNO

Prepared for

Institutional Review by the

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and the

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PROGRAM ASSESSMENT SUBMISSION CHECKLIST

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Program (Specify delivery Models i.e. intern)	
X	<i>Read Me</i> file or other description of the materials submitted (this can be in the body of an email)
X	Program narrative
X	Course syllabi for two most recent years
X	Assessment tools reported on the Biennial Report
X	Program Summary

Submission:

Emailed and this completed check list (printed or saved on CD/flash) mailed to:

Commission on Teacher Credentialing
 1900 Capitol Avenue
 Sacramento, CA 95811
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DIRECTIONS FOR READER

This report is comprised of five sections:

Section One:

Document Contents. This includes Table of Contents and Directions for Readers.

Section Two:

The program's response to the Program Standards. The Program Standards are in blue, the program responses in black. Hyperlinks are in blue boxes.

Section Three:

Contains the expanded syllabi for each course in the program. The expanded syllabi detail the course objectives, readings, topics and activities for each lesson. Full descriptions of each course assignment are also provided.

Section Three is hyperlinked to the Program Standards of Section Two. Section Three of the document reports where and how the program meets each standard. Section Three provides the supporting evidence of how each standard is met.

This document is in PDF format. Please note that the back arrow in the tool bar will enable the reader to easily go back and forth between the Program Standards and the supporting evidence. Click on bookmarks if you would like the Table of Contents to appear on the side bar.

Section Four:

The program response to the assessment tools the program uses for candidate and program assessment based on the Program's 2010 Biennial Report.

Section Five - Program Assessment Summary:

Provides contextual information to the program assessment readers and site visit team members. The summary also provides a brief overview of the structure, courses, and sequence of the credential program. The program summary addresses the following three categories: Program Design, Course of Study (Curriculum and Field Experience), and Assessment of Candidates.

SECTION TWO

Response to 2007

Standards for Health Services

School Nurse Credential Programs

PROGRAM STANDARD 1

Program Design

The school nursing services program and any prerequisites include a purposeful sequence of coursework and field experiences that effectively prepare candidates to provide school nursing services to all students to optimize learning. The school nurse services program prepares candidates to understand contemporary conditions of schools and society and how school nursing services need to change and evolve to address these changing conditions.

Criterion 1: The design of the program is based on a clearly stated rationale that has a sound theoretical and scholarly foundation anchored to the knowledge base of school nursing.

Of utmost importance is that the program offers quality education that prepares the school nurse candidate with the decision-making skills, based on theory and research, to provide quality healthcare to diverse client populations across environments, which includes effective leadership, supervision, management, safe and effective delegation, and application of the nursing process in the school setting. Inherent in the teaching/learning process within the program is the reciprocal responsibility of faculty and candidates in influencing the process of learning outcomes. In this relationship, faculty serve as role models and valuable resources in facilitating the advancement of competence in school nursing practice through leadership, research, and scientific inquiry. The learner is also expected to exhibit self-direction, and a sense of responsibility and accountability in mastery of knowledge and skills consistent with professional practice.

The faculty further recognizes the unique diversity of the population throughout California and the need for school nurse candidates to understand the need to deliver safe and effective care and to work harmoniously with clients and families of various ethnic backgrounds, languages, beliefs, values, learning styles, and support systems. The importance of understanding diversity is viewed as paramount into the program and it is incorporated into the curriculum. Candidates are evaluated on their ability to understand those differences and to their ability to work effectively with clients and families of other cultural and ethnic backgrounds.

The Program conceptual framework embraces that of the CSUF Department of Nursing: *Conceptual Framework* – The baccalaureate and graduate programs in nursing at California State University, Fresno utilize the Neuman Systems Model. The framework evolves from the philosophy and focuses on the domains of client, environment, health, and nursing. This framework is very applicable to school nursing practice in that the client is seen as a composite of variables, each of which is a subpart of all parts which forms the whole of the client. The

school nurse assists the client in strengthening lines of resistance and the ability to cope with stressors, both internal and external, that impact the client's life and/or that of the family. These stressors may be related to health and/or environmental circumstances that impact the life, or lives of the client and family, and can be intra-personal, interpersonal, and extra-personal in nature. Definitions specific to the model:

Client/Client System – The client/client system (person) is viewed as a composite of variables (physiological, psychological, socio-cultural, developmental, and spiritual), each of which is a subpart of all parts, forms the whole of the client. The client as a system is composed of a core or basic structure of survival factors and surrounding protective concentric rings. The concentric rings are composed of similar factors, yet serve varied and different purposes in retention, attainment, or maintenance of system stability and integrity or combination of these.

Environment – The environment consists of both internal and external forces surrounding the client, influencing and being influenced by the client, at any point in time, as an open system. The created environment is an unconsciously developed protective environment that binds system energy and encompasses both the internal and external client environment.

Health – Health is a continuum of wellness to illness, dynamic in nature, and is constantly subject to change. The client is in a dynamic state of either wellness or illness, in varying degrees, at any given point in time.

Nursing – A unique profession concerned with all variables affecting clients in their environment. Nursing actions are initiated to best retain, attain, and maintain optimal client health or wellness using the three preventions (primary, secondary, tertiary) as interventions to keep the system stable.

The school nurse is directed toward reducing stress factors that influence, or could influence, the attainment of an optimum level of wellness by an individual, family, or community. This goal is achieved through the nursing process, a systematic, problem-solving technique used for implementing independent, interdependent, and dependent nursing actions. This process consists of assessing the client's actual and/or potential health problems, constructing a diagnostic statement, formulating goals and objectives with expected outcomes, implementing therapeutic interventions, and evaluating the effectiveness of these interventions/preventions. School nursing is advancing into a new era of expanding roles and responsibilities in primary, secondary, and tertiary preventions. Faculty are responsible for the preparation of competent school nurses who can assume current school nursing roles and adapt to future health needs and evolving healthcare requirements. The program strives to maintain a flexible curriculum that emphasizes a total client approach that is based on evolving nursing theory and knowledge from the sciences and other

related disciplines. To keep abreast of current issues in school nursing practice, faculty relies on an involved advisory board made up of school nurses, school nurse administrators, school administrators, and other members of the community with a vested interest in school nursing practice and the well being of school aged children. Faculty also maintains current membership in the California School Nurses Organization and National School Nurses Organization, as well as attending local, state, and national school nurse meetings.

***Criterion 2:** The program includes a purposeful sequence of coursework and field experiences that effectively prepare candidates to provide school nursing services to all students to optimize learning.*

Program prerequisites: All school nursing candidates are required to take a statistics course and a nursing research course prior to entering the program. This coursework may have been completed in conjunction with the student's bachelor's program or for a master's degree. If not, it is taken prior to admission to the School Nurse Services Credential Program. This coursework gives the school nurse student the understanding for the value of research in nursing practice and the necessary insight and tools by which research can be conducted in school nursing practice. The importance of research to validate school nursing practice is strongly emphasized in the program.

Post-baccalaureate course work specific to Program Standards 1-9 (28 units)

CDDS 125, Audiology and Audiometry for School Nurses (3U)

SPED 120, Introduction to Special Education (3U)

COUN 174, Introduction to Counseling (3U) (or COUN 200)

NURS 136, Health Appraisal (3U) (or NURS 180T)

NURS 137, Teaching Strategies for the Healthcare Client (3U)

NURS 183, Vision and Scoliosis in the School Setting (1U)

NURS 184, Introduction to School Nursing Seminar (3U)

NURS 185, Seminar in School Nursing (3U)

NURS 186, School Nurse Practicum I (3U)

NURS 187, School Nurse Practicum II (3U)

The credential coursework comprises 28 units. A course in Statistics and Nursing Research are program prerequisites prior to admission. If candidates entering the program have a bachelor's

degree in other than nursing, these candidates are required to take upper division community health coursework (both didactic and field experience) before entering the program. This coursework is offered during a summer session at CSUF. This post-baccalaureate program provides a multi-disciplinary curriculum, with a core of 13 semester units related specifically to school nursing practice (NURS 183, 184, 185, 186, and 187 – both didactic and practicum), and six semester units in other nursing coursework (NURS 136, NURS 137). Nine of the 28 units of coursework are offered in other CSUF departments such as the Dept. of Communicative Disorders (CDDS 125), Psychology, and Education (SPED Ed 120 and COUN 174). It should be noted that all courses related to the program can be taken online, either through CSUF or other accredited universities. School nurse candidates may take some courses through other accredited universities with approval of the Program Coordinator though a total of 15 of the 28 units must be taken through CSUF, which includes 12 units of core school nurse courses (NURS 184, 185, 186 and 187). It should be noted that candidates who are newly employed and beginning school nursing practice are not encouraged to take more than six units each semester in order to avoid undue stress. Candidates new to school nursing are also encouraged to partake of new nurse orientation programs offered in their area to help them adjust to their new school nursing role.

Program coursework: Phase I program coursework, prerequisites to core school nurse coursework includes: CDDS 125, Audiometry for School Nurses, SPED 120, Mainstreaming the Exceptional Child, COUN 174, Introduction to Counseling, NURS 136, Health Appraisal, and NURS 137, Teaching Perspectives for the Healthcare Client. These courses are required before the school nurse candidate enters into the core school nursing courses as each of these phase I courses contributes to the knowledge base the school nurse candidate needs in order to function competently in school nursing practice. Candidates are advised to take a course in Audiology-Audiometry first as their first class as the vast majority of candidates have already begun practicing school nursing and need this course in order to do hearing testing in their schools. CDDS 125, Audiometry for School Nurses, is offered through CSUF in the fall or it can be taken through other universities with approval from the Program Coordinator. SPED 120, Introduction to Special Education, and COUN 174, Introduction to Counseling, (or COUN 200) are offered every semester through CSUF or may be taken through other accredited universities with approval from the Program Coordinator. NURS 136, Health Appraisal, (or N180T, Physical Assessment for School Nurses) and NURS 137, Teaching Perspectives for the Healthcare Client, and NURS 183, Vision and Scoliosis in the School Setting, are also considered Phase I courses as they provide the necessary knowledge and assessment skills needed in practicum courses, therefore they are offered in the summer prior to core school nurse courses which begin in fall.

As of summer 2010, nursing courses specific to the program which were previously taken through the CSUF Dept. of Nursing are now being offered sequentially through CSUF Continuing and Global Education Special Sessions beginning in June 2010 with NURS 137, Teaching Perspectives for the Healthcare Client (3U); NURS 136, Health Assessment, (3U) or

NURS 180T, Physical Assessment for School Nurses, (3U) in July; and NURS 183, Vision and Scoliosis in the School Setting, (1U) which is offered on campus in August in conjunction with a Phase II program orientation which candidates are required to attend. NURS 184, Introduction to School Nursing, (3U) is offered in the fall semester along with NURS 186, School Nurse Practicum I, (3U) with an elementary emphasis. NURS 185, School Nurse Seminar, (3U) is offered in the spring semester, along with NURS 187, School Nurse Practicum II (3U), with a secondary emphasis.

Faculty believes that this sequence of courses provides the student with a base of knowledge upon which to build school nursing competencies. The Phase I courses provide candidates with a framework for understanding other disciplines within the school setting and problems encountered there. This empowers the candidate with a broader perspective when entering the school nurse seminar and practicum courses. In NURS 184, Introduction to School Nursing, students are asked to develop a personal philosophy of school nursing and to examine legal/ethical issues and the expanded roles they will face as practitioners in caring for regular elementary children and those with special needs. In NURS 185, the emphasis is pre-adolescent and adolescent health issues, as well as other subject matter of importance to school nursing such as the Group Process, curriculum development and grant writing. These seminar courses contribute significantly to the school nurse candidate's knowledge base in preparing them for their hands-on experiences in the two clinical courses.

School Nurse Services Credential Program catalog course descriptions:

CDDS 125 - - Audiometry and Audiology for School Nurses 3 units (fall/spring)

Course description: Prepares students to obtain certification as a school audiometrist. Provides an introduction to the profession of audiology, hearing loss and its medical aspects; the components of a hearing conservation program; basic assessment and management; and the fundamentals of interpretation.

Special Education 120 - - Introduction to Special Education 3 units (fall/spring)

Prerequisites: EHD 50. Introduction to identification, characteristics, theories, curriculum, and instruction for students with mild to severe disabilities, legislative guidelines, nondiscriminatory assessment, parental involvement, and foundations in special education. Includes 15 hours of observation/participation.

Counselor Education 174 - - Introduction to Counseling 3 units (fall/spring)

Course description: An overview of basic counseling models, including psychoanalytic, behavioral, cognitive, and humanistic approaches. Includes a personal counseling experience.

Counselor Education 200 - - Seminar in Counseling Techniques 3 units (fall/spring)

Course description: Emphasis given to interviewing skills, philosophy, theory, and methodology as applied to counseling. (2 seminar/2 lab hrs)

Nursing 136 - - Health Appraisal 3 units (fall/spring)

Course description: Health appraisal integrates psychosocial and pathophysiological processes including techniques of history taking and health assessment in nursing practice and knowledge of normal findings as well as common deviations. (2 lecture/2 lab hrs)

Nursing 180T – Physical Assessment for School Nurses 3 units (summer)

Health appraisal integrates psychosocial and pathophysiological processes, which include techniques of history taking and health assessment in nursing practice and knowledge of normal findings and common deviations.

Nursing 137 - - Teaching Strategies for the Health Care Client 3 units (summer)

Course Description: Explorations of nurse's role as a teacher in healthcare setting. Principles of teaching and learning applied to teaching of individuals and groups. Opportunities for microteaching are provided.

Nursing 183 -- Vision and Hearing Screening in the School Setting 1unit (summer)

Course description: Guidelines for screening vision and scoliosis in California public schools to include state mandates, setting up screenings, completing screenings, and follow-up on positive findings. Application of current research and nursing theory incorporated.

Nursing 184 - - Introduction to School Nursing 3 units (fall)

Prerequisites: admissions to the School Nurse Services Credential Program, NURS 136, 137; PSYCH 168 or SPED 120; COUN 174 or 200. Corequisite: NURS 186. Role of the nurse in the school health program; parameters of school health practice. legal guidelines, professional accountability, coordinated health programs, health education, and health needs of complex multicultural school aged population. (available online.)

Nursing 185 - - School Nurse Seminar 3 units (spring)

Prerequisites: Admission to the School Nurse Services Credential Program, NURS 136, 137; PSYCH 168 or SPED 120; COUN 174 or 200. Corequisite:

Nursing 186 - - School Nurse Practicum I

3 units (fall)

Prerequisites: admission to the School Nurse Services Credential Program, CDD 125; NURS 136, 137; PSYCH 168 or SPED 120; COUN 174 or 200. Corequisite: NURS184. Elementary school nurse experience, including special education; direct supervision by a credentialed school nurse require. Scheduled preceptor and faculty conferences. Class participation online. (9 clinical hours/week)

Nursing 187 - - School Nurse Practicum II

3 units (spring)

Prerequisites: admissions to the School Nurse Service Credential Program; CDD 125; NURS 136, 137; PSYCH 168 or SPED 120; COUN 174 or 200; NURS 184. Corequisite: NURS 185. Secondary school nurse experience, including alternative education; direct supervision by credentialed school nurse required. Scheduled conferences with preceptor and faculty. Class participation online. (9 clinical hours/week).

***Criterion 3:** The design of the program provides extensive opportunities for candidates to learn to address the health related educational needs of all students.*

While working under the supervision of a qualified school nurse preceptor, candidates have the opportunity to achieve optimal levels of wellness with children and adolescents by taking “teachable moments” in the health office and advising parents while in clinical practice in NURS 186, elementary school nursing in the fall, and in NURS 187, secondary school nursing in the spring, while working under the supervision of a qualified school nurse preceptor. Candidates also have the opportunity to develop a health lesson plan and to execute that plan by carrying out a health teach in classroom in both NURS 186, with children at the elementary level, and again in NURS 187, students have the opportunity to facilitate small groups or develop curriculum, a lesson plan and carry out a classroom teach at the secondary level. Preceptors and/or classroom teacher provide candidates support and timely feedback related to their teaching effectiveness.

It should also be noted that candidates have generally had opportunities in their undergraduate education to do health teaching with individuals and groups. Preceptors and classroom teacher provide immediate feedback to candidates on their teaching effectiveness. Previous work experience has also afforded many students the opportunity to practice client and group teaching. In lecture, seminar and practicum courses there is evidence of curriculum components that comprise this standard are present in didactic coursework:

In NURS 137, Teaching Strategies for the Healthcare Client, prior to taking core school nurse courses, candidates focus on teaching-learning theories, learning styles, developmental/cultural/language differences, application of theories/models, learning contracts, design/implementation/evaluation of educational units, teaching plans, and micro-teaching.

In NURS 184 (Introduction to School Nursing), candidates spend *Week 10* of the semester gaining further insight into the role of the school nurse as an educator. Some of the questions for that week include learning more about goals of health instruction in the school setting, characteristics of successful curricula, the school nurse role in development of curriculum, and health promotion for school aged children, faculty and staff.

In NURS 185, School Nurse Seminar, candidates are asked to respond to questions related to health education throughout the semester. *Examples are found in the following weeks: Week 1*, discuss learning strategies that work with pre-adolescents and adolescents; *Week 2*, “Health Framework for California Public Schools, planning to teach small groups, coordinated school health programs; *Week 3*, supporting student success; *Week 4*, goals of health instruction, characteristics of successful curricula, the Health Education Process, the Group Process, and creating and facilitating groups, worksite promotion, CHEM – comprehensive health education model; *Week 5*, working with the P.E. department to provide health teaching and health promotion; *Week 6*, tobacco prevention/cessation programs, other; *Week 7*, HIV/AIDS education, sex Ed. curriculum; *Week 8*, health teaching and small groups, i.e. pregnant teens; *Week 9*, eating disorders and programs; *Week 10*, suicide prevention and intervention; *Week 13*, writing and publishing articles relevant to health and school nursing.

In NURS 186, School Nurse Practicum I, candidates have many opportunities to teach children and families on an individual bases with regard to disease prevention, medication administration at school, safety, prevention of spread of communicable disease, community resources, other. Candidates in NURS 186 also have the opportunity to develop a *Health Teaching Plan* that includes a classroom presentation. In order to carry out this assignment, students must review the CDE (California Dept. of Ed.) *Health Framework for California Public Schools* (2003) for grade level concepts, content, and examples of skills and behaviors, research relevant subject matter, apply learning theories, develop a teaching outline, carryout the presentation, and evaluate learning effectiveness. Candidates also share their teaching outlines on Blackboard for the benefit of other students, who are able to print them out and include them in a “Personal Reference Manual” for use in their own school nursing practice.

In NURS 187, School Nurse Practicum II, throughout the semester, candidates have many opportunities to teach pre-adolescents/adolescents in the area of wellness, disease prevention, self-care, safety, and insight into community health resources. In NURS 187, there are two

assignment related specifically to health teaching. Candidates have a choice of doing one or the other. They are as follows: *The Aggregate Teaching/Small Group Activity*, This assignment provides candidates with the opportunity to expand their teaching skills into a series of presentations with a focus on group dynamics and support, as well as the adolescent's developmental stage and unique needs. With this assignment, the candidate is asked to consult with their preceptor, a school psychologist, and/or a counselor in locating an aggregate of 6-12 pupils with a particular health education/counseling need (i.e., pregnant minors, school-aged parents, at-risk students, athletes, smokers, others), the candidate then develops 2 or 3 informal lesson plans (after reviewing CDE Health Framework for California Public Schools for subject matter/age appropriateness, researching subject matter, reviewing CA Ed Code, and district policy) for the purpose of facilitating two or three sequential lessons relative the health issues of the group. To do this assignment, candidates need to review the *Group Process* and *Creating and Facilitating Groups* that they learned about in N185 (week 4). With the second assignment, Health Education Curriculum Proposal and Teach, the candidate is asked to review current health curriculum in a secondary health class to determine if there is an area that has not been addressed, i.e. dangers of Hepatitis B and infections with tattooing. With approval from classroom teacher, the candidate then reviews the CDE *Health Framework for California Public Schools* (2003), CA Ed Code, district policy, researches the topic, gathers the materials and develops a complete teaching outline (which could be picked up and used by other than the candidate), presents the lesson, and evaluates learning outcomes. Both of these health teaching experiences are shared on Blackboard for the benefit of follow students, who will be able to print out the teaching outlines and include them in a Personal Reference Manual for use in their own school nursing practice. School nurse preceptors are asked to be present to give feedback to candidates on their performance, as well as the classroom teacher. Health teaching activities are evaluated by clinical instructors through review of written assignments and student journaling.

Evidence of opportunities for candidates to learn to address health related educational needs.

Supporting Documentation:

Program Curriculum Matrix, **Sec. 2**, p. 129

Syllabi, **Sec. 3** - NURS 137, p. 81; NURS 184, p. 108; NURS 185, p. 238; NURS 186, p. 199; NURS 187, p. 328.

Weekly Questions Booklets, **Sec. 3** - NURS 184, p. 136; NURS 185, p. 261

Examples of Student Assignments relevant to criterion:

N184, responses to questions on Health Education, week 10

N185, responses to Health Education related questions, weeks 1-13

N186, Health Teaching Plans, module 3

N187, Health Education Curriculum Proposal paper and Teach, module 3

Aggregate Teaching/Small Group Activity, module 3

See also:

N184, N185, N186, N187 completed assignments/journaling stored in Bb courses.

N184, N185, N186, N187 binders of samples of student work on site.

***Criterion 4:** By design, the program provides extensive opportunities for candidates to learn to access and use community resources to address the health related needs and concerns of students, parents, staff, and other members of the educational community.*

While the Ryan Act (1970) eliminated the requirement for a PHN (Public Health Nurse) certification, CSUF program faculty recognizes that public health nursing brings an important community focus to school nursing practice. School nurse candidates graduating from BSN programs have taken community health coursework in their under graduate program. Nurses who graduated from Associate of Art/Science degree two-year programs, and who hold bachelor's degrees in other than nursing, have not. Faculty, with recommendation from the School Nurse Services Credential Program Advisory Board, made the decision to require 5 units of university community health coursework as a prerequisite (3U didactic and 2U of field experience) for nurses who had not taken community health course work in their undergraduate programs. This requirement gives those nurses the global understanding for community health issues and insight into the various resources that school nurses needs in order to effectively assist children, adolescents, and families. Knowledge acquired by taking community health coursework gives the school nurse candidate insight into important resources such as Health Departments programs and services, Social Services, Family Planning services, as well as sources of food, clothing and shelter. CSUF community health coursework can be taken during the summer. The didactic portion is offered online and the practicum experience, for those outside the area, can be taken in their own community under the supervision of a qualified PHN preceptor as long as a University/Agency Internship Agreement is in place. Evidence that curriculum components that

comprise this standard are present in didactic coursework in seminar courses and in the candidate's clinical experience:

In NURS 184, Introduction to School Nursing (seminar), didactic coursework. Evidence of the importance of community involvement is addressed in weekly research questions throughout the semester. Examples of this are found in the following weeks: *Week 1*, dynamics of school district organization, the role of the State Board of Education, and funding sources for education; *Week 2*, coordinated school health programs, local, state, and federal roles; *Week 3*, HIPAA/FERPA, confidentiality issues as they relate to community health agencies and care providers; *Week 4*, school nurses as managers of school health programs; *Week 7*, working with migrant programs, dental screening programs involving community; *Week 8*, communicable disease control, tuberculosis screening programs and working with community health agencies; *Week 9*, coordinated school health programs and community involvement; *Week 11*, cultural differences, child abuse reporting; *Week 13*, parent rights, SELPAs (Special Education Local Planning Areas), understanding for grief stricken parents; *Week 14*, interaction with families; *Week 15*, the evaluation and outside referral of children with special physical health needs. (See N184 Weekly Questions Booklet for questions.)

Further, in NURS 184, candidates are required to write a School Board Paper. This requires that school nurse students research the purpose, election process, and makeup of School Boards. They must also spend a minimum of 1.5 to 2 hours attending a local school board meeting, observing the proceedings, determining the players, the issues and concerns that come before the board and from whom, and what value and purpose attendance at school board meeting has for the school nurse. Other NURS 184 assignments that increase the students understanding for families, community, and major issues regarding cultural/ethnic differences are the Cross-Cultural Interview (a personal interview with family of a different culture other than that of the student), or the *Cross-Cultural Book Report* (Ann Fadiman's *The Spirit Catches You and You Fall Down*, 1997). Students frequently express appreciation of the insight they gain from these assignments with regard to resolving communication problems, barriers to education, understanding, tolerance, and access to care. (See NURS184 Syllabus for assignment details.)

In NURS 185, Seminar in School Nursing, evidence of the importance of community involvement is addressed in the weekly research questions throughout the semester. Examples of this are found in the following weeks: *Week 1*, school nurses as managers; *Week 2*, coordinated school health programs; *Week 3*, promoting the school nurse image; *Week 6*, alcohol and families; *Week 7* communicable disease in the community; *Week 8*, visiting community programs, services for pregnant teens; *Week 9*, referral for mental health issues, *Week 10* suicide prevention and intervention; *Week 11*, gangs, violence, campus emergencies and community involvement; *Week 12*, school based clinics, politics 101 and legislative involvement; *Week 13*, grants and sources of funding; *Week 14*, targeted case management; *Week 15*, the school nurse community. (See NURS 185 Weekly Questions Booklet.)

Further, in NURS 185, candidates are required to write a Legislative Paper. This involves having insight into the role of the school nurse in affecting legislation that affects children's health, families, and the school community. This assignment includes communication with a state senator or legislator, even the Governor. Students are asked to identify a bill or some proposed legislation (state) that has the potential to affect the school health program or school nursing practice in California. Students are asked to write a letter or actually visit the office of a local legislator. During an office visit, students are encouraged to educate the senator/legislator on current issues in school health and the role of the school nurse as a member of the education team. (See N185 Syllabus for assignment details.)

In NURS 186 and NURS 187 (practicum courses) throughout practicum experiences, candidates must interact with members of the community, i.e., families, health care providers, and agencies in their efforts to assist children and families with needed services. To further their insight into community resources, candidates are required to spend 8-10 hours each semester out in the community participating in various community activities, such as health clinics, health fairs; visiting referral agencies and programs, i.e., for pregnant and parenting teens, sports clinics, Early Childhood programs, health referral agencies; and attending meetings that involve community members/agencies, such as a School Attendance Review Board meeting and PTA (Parent Teacher Association) meeting. In NURS 186, the Cross-Cultural Special Ed Case Study is a good example of an assignment where students must involve families and the use of community resources in order to meet the needs of the subject of their case study. In NURS 187, as an assignment, candidates are required to develop a Newsletter that frequently includes information about community resources specific to health care. The target population for receiving the newsletter may be faculty, pupils, families, and/or community. Many candidates in the practicum courses include investigation and evaluation of various community agencies as one of their Student Goals and/or Learning Objectives. Some students choose to develop a Reference Manual with detailed information about various referral agencies including referral criteria, services available, and contact persons. Candidates are also encouraged to become involved with community agency boards and to interface with local public health nurses and hospital nurses. (See syllabi for assignment details.) Participation in community activities are evaluated by clinical instructor through student journaling and monitored by the candidate's preceptor.

Opportunities for candidates to learn to access and use community resources to address the health related needs and concerns of students, parents, staff, and other members of the educational community.

Supporting Documents:

Program Curriculum Matrix, **Sec. 2** – p. 129

Syllabi, **Sec. 3** - N184, P.108; N 185, p. 238; N186, p. 199; N187, p. 328

Weekly Questions Booklets, **Sec 3** - N184, p. 136; N185, p. 261

Examples of Student Assignments relevant to criterion:

N184, School Board Paper

N186, responses to clinical journal question relating to SARB

N186, N187, clinical journaling on required 8-10 hrs in each practicum spent out in the community

See also:

N184, N185, N186, N187 binders of samples of student work on site.

N184, N185, N186, N187, completed assignments stored in Blackboard courses

(Note: Community health coursework required prior to entering program)

Criterion 5: *By design, the program provides extensive opportunities for candidates to learn to develop and implement plans of care as appropriate to the needs of students.*

Candidates are asked to use a systematic approach to problem solving in nursing practice in the program. This includes developing appropriate individual healthcare plans for clients. Before a plan of care can be developed and implemented, school nurse students must have a clear understanding for the sequential steps in the Nursing Process. This is something that nurses learned in their undergraduate nursing programs. This knowledge is reinforced in the program. To begin with, candidates are asked to acquire the NASN (National Association of School Nurses) publication, *School Nursing: Scope & Standards of Practice (2005)*, and the basic textbook used in NURS 184 and NURS 185, a compilation of work by multiple school nurse authors and edited by Janice Selekmán, *School Nursing: A Comprehensive Text (2005)*. Individual healthcare plans are well addressed in this text. And, the first six standards in NASN's *School Nursing: Scope & Standards* deal specifically to the Nursing Process – assessment; diagnosis; outcomes identification; planning; implementation, and evaluation. Candidates are expected to know and use the Nursing process in evaluating the healthcare needs of their clients and in developing and implementing individual healthcare plans and emergency actions plans related to client chronic health conditions. It should also be noted that candidates are also required to use standardized language in developing these individual healthcare plans. To accomplish this, students are asked to acquire NASN's (2004) *Using nursing languages in school nursing practice*. NASN (2007-2008) *NANDA's Nursing Diagnoses: Definition and*

classification is also recommended. Use of Individual Healthcare Plans is addressed in didactic coursework and in the candidate's practicum experience:

In NURS 184, Introduction to School Nursing (seminar), didactic instruction in nursing theory and implementation of the Nursing Process, especially related to care plans and workups on children being evaluated for special education programs, is covered. Weekly research questions for the following weeks specifically address the need to develop individual healthcare plans and emergency action plans: *Week 5*, food allergy; *Week 8*, Sickle Cell disease; *Week 9*, all questions for this week relate to chronic conditions that ask school nurse students to develop individual healthcare plans for, i.e., asthma, ADHD, obesity, seizure conditions, Cystic Fibrosis, diabetes, allergic rhinitis, and encopresis; Research questions for *Weeks 13-15* deal with children with special needs and medically fragile children (physical and/or developmentally delayed clients) in school population and questions for those weeks require the development of care plans.

In NURS 185, Seminar in School Nursing, candidates have an opportunity to write a research paper on an adolescent mental health issue, or a behavioral problem leading to other health issues. In the assignment, the student is to research the health problem/concern and discuss ways to strengthening lines of resistance and restoration that individual back to optimal health, which includes the Nursing Process and developing a healthcare or emergency plan.

In NURS 186 and NURS 187 (practicum courses), while under the watchful eye of a qualified school nurse preceptor, candidates are confronted with challenges on a daily basis that require use of the Nursing Process and may lead to the development of a individual healthcare plan and/or an emergency action plan to safeguard the clients health and well being. Candidates are also expected to review client health records and to interview parents of clients with chronic health care issues and/or life threatening allergic conditions to determine the need for an individual healthcare plan or emergency action plans.

One of the most thorough examples of an assignment that requires the school nurse student to use the Nursing Process and problem solving techniques is in the completion of a Cross Cultural Special Ed Case Study assignment for NURS 186. In this assignment, students are asked to collect data on a child from a different cultural/ethnic background and to interpret the data to determine potential or actual health problems that may impact the child's ability to learn, as well as cultural, communication, poverty, and/or dysfunctional family issues that may also stand in the way of learning and access to health care. Students are asked to generate nursing diagnoses and implement interventions in conjunction with IEP process and meeting. This frequently leads to the development of a care plan. As time constraints allow, school nurse students are encouraged to evaluate the effectiveness of these interventions.

In both NURS 186 and NURS 187 (practicum courses), candidates are expected to use a systematic approach to problem solving in assessing the health status of children and adolescents

that come into the health office and those who are referred to the school nurse by teachers and others. Candidates are also encouraged to go beyond the child to use a systematic approach to assisting families in solving problems such as access to health care, shelter, food, and clothing. Before a candidate can teach a health lesson or facilitate a small group discussion, that student must carry out the Nursing Process - assess the need, research the material, identify outcomes, plan, prepare, implement, and evaluate outcomes to determine teaching effectiveness. Use of the Nursing Process and Plans of Care developed by candidates are evaluated by the clinical instructor through student journaling and the candidate's preceptor through direct observation.

Opportunities for candidates to learn to develop and implement plans of care as appropriate to the needs of students:

Supporting Documentation

Program Curriculum Matrix, [Sec. 2](#) – p. 129

Syllabi, [Sec. 3](#) - N184, p. 108; N185, p. 238; N186, p. 199; N187, p. 328

Weekly Questions Booklets – N184, p. 136; N185, 261

Examples of Student Assignments relevant to criterion:

N184, weekly questions, special needs pupils, weeks 8-15

N186, Cross-Cultural Special Ed Case Study

N186, N187, journaling on pupils with special needs

See also:

N184, N185, N186, N187 binders of samples of student work on site.

N184, N185, N186, N187, completed assignments stored in Blackboard courses.

***Criterion 6:** By design, the program provides extensive opportunities for candidates to know and understand the roles and responsibilities of school nurses within the educational setting.*

The candidate synthesizes the role of the school nurse - as insight and knowledge of the multifaceted role develops, school nurse students begin to understand how all aspects of school nursing work together to complete the picture. Following is an explanation of what is included in the sequential coursework in the program that helps the candidate develop a rounded and global understanding for school nurse roles and responsibilities within the educational setting:

Phase I courses (16 units), which include coursework in audiology, health teaching, mainstreaming, counseling, health assessment, vision and scoliosis screening techniques gives candidates the necessary tools to meet the needs of children, adolescents, and staff in the school setting – to conduct screening to detect deviations from the norm, promote and teach health, understand the issues related to special needs pupils, counsel effectively, and carry out meaningful health assessments on clients in the school setting. Community health coursework is

required prior to entering the program, which gives candidates initial insight into community health issues. CDDS 125, Audiometry and Audiology for School Nurses (3U), taken through the CSUF Department of Communicative Disorders, is one of the first courses that is recommended for school nurse students to take. This gives candidates the skill and ability to carry out state mandated hearing testing in the school setting and to assess those children referred by other members of the education team for suspected hearing loss which impacts the child's ability to learn. NURS 137, Teaching Perspectives for the Healthcare Client, gives the school nurse student the necessary insight into the principles of teaching and learning applied to teaching individuals and groups. Health teaching and health promotion is a significant part of what the school nurse does on a daily basis in health office, within the school community, and as a guest in the classroom. In SPED 120, Mainstreaming Exceptional Students, students gain insight into the special needs of exceptional children, as well ethical issues and legal guidelines that dictate how the needs of these children must be met, including the contributing role of the school nurse. PSYCH 169, an alternative course choice for SPED 120, gives school nurse student insight into psychological theory and research related to the impact of disability on disabled persons (children and adolescents in the school setting) and attitudes towards disability, which in turn, helps the school nurse student understand how the school nurse role fits into the picture. COUN 174, Introduction to Counseling, (or COUN 200) gives the school nurse student insight into methodology and the interviewing skills needed to gain client confidence and trust and to elicit the necessary information in order to help the client make positive lifestyle changes and/or meet his/her health related needs. This skill is particularly valuable for the school nurse student in helping adolescents find answers to confidential health issues. NURS 136, Health Appraisal, provides the school nurse student with the knowledge, ability, and skill to obtain a meaningful health history on a client and to carry out a thorough health assessment in keeping with the Nursing Process. Assessment is at the core of what is involved in the multifaceted role of the school nurse. School nurse students may take phase I course work through other accredited universities with approval from the program coordinator. In phase II, core school nurse courses, synthesis is furthered as students take what they have learned in didactic courses (NURS 184, Introduction to School Nursing, and NURS 185, School Nurse Seminar) and put it into practice in their practicum courses (NURS 186 and NURS 187).

Phase II, or core school nurse coursework, enables candidates to further identify, delineate, and clarify their role as a professional school nurse. Practical and theoretical knowledge of school nursing practice based on legal guidelines are included throughout didactic coursework in both NURS 184 and NURS 185 seminars and candidates are expected to put this knowledge into practice in their clinical experiences in NURS 186 and NURS 187 (practicum courses).

The didactic coursework (NURS 184 and NURS 185) covers the multiple and varied aspects of school nursing practice. It is based on professional standards of school nursing practice, nursing theories, legal guidelines (Nurse Practice Act, CA Education codes, and other state and federal

codes and laws) and ethical behavior. Candidates gain insight into the fact that the school nurse is the only health professional in the school setting and, as such, must be equipped with the knowledge and skills to effectively and safely manage multiple types of health related situations. Candidates also gain insight into their role as leaders and program managers, health educators, and members of the education team.

In NURS 184, some specific things that are addressed are legal basis for school nursing practice, Standards of School Nursing Practice, coordinated school health programs, screening programs, health promotion and education for pupils and staff, case management of pupils with various acute and chronic health problems, individuals with disabilities, the IEP (Individual Education Plan) Process, environmental safe issues, pupil and parents' rights, etc. To incorporate the role of the pediatric nurse practitioner, nurse practitioners entering the program are asked to discuss their role in school nursing and asked how it would differ from that of other school nurses. Role confusion, burnout and ineffectiveness are also addressed in that same week. The first assignment the school nurse student has is to develop a Personal Philosophy of School Nursing. This assignment gives them insight into their own attitudes and understanding for others that may need to change. The assignment involves researching standards of nursing practice, theoretical concepts, moral/ethical responsibilities, personal values and beliefs, and perception of the school nurse role. After review by the course instructor, students are to place their philosophy in their Personal Reference Manual. Upon the completion of core school nurse courses in the spring semester, students are invited to review their philosophy to see if it has changed. This assignment gives candidates an opportunity to sincerely reflect on their own values, ethics, and beliefs as they relate to their school nursing practice.

In NURS 185, School Nurse Seminar, candidates learn about the complexities of adolescent health issues, spends time gaining insight into school nursing research, finding out about funding sources, grant writing, and legislative issues, etc. In *Week 12*, students are asked to define competency with regard to school nursing practice, what serves as a framework for professional expectations, and standards of performance that describe a competent level of behavior in that professional role.

In the practicum courses (NURS 186 and NURS 187), candidates have the opportunity to demonstrate their ability to put into practice what they have learned in the didactic coursework. Students are expected to use the Nursing Process effectively in the school setting. They are evaluated on their critical thinking skills, effective communication and collaboration, and ability to exercise sound judgment. Candidates are encouraged to think globally, to see the whole child (including family) and community in their problem solving efforts. School nurse students are expected grow in their knowledge of community resources and services for children and families; insight into funding sources; legislation that impacts the health and well being of

children and school nursing, and to recognize the school nurse's role as advocates for children and families. Candidates also need to recognize the need for continued lifelong learning and professional growth. They are required to keep a journal on their clinical activities which is reviewed regularly by the student's clinical instructor. Meaningful assignments in practicum courses include: A Cultural Special Ed Case study, teaching health lessons in the classroom, reviewing health policies, facilitating a small groups relevant to health promotion and teaching, learning to write a professional newsletter, and gaining insight into the roles and responsibilities of other members of the education team. These assignments are discussed more fully within other standards in the document.

Opportunities for candidates to know and understand the roles and responsibilities of school nurses within the educational setting:

Supporting Documentation

Program Curriculum Matrix, **Sec. 2**, p. 129

Syllabi, **Sec. 3** – CDDS, 125, p. 2; N185, p. 238; COUN 174 (200), p. 16 and 29;

SPED 120, p. 45; N136, p. 60; N137, p. 81; N183, p. 97; N184, p. 108;

N185, p. 238; N186, p.199; N187, p.328

N184 and N185 Weekly Questions Booklets, **Sec. 3**, p. 136 and 261

N186/N187 Preceptor Syllabus, **Sec. 3**, p. 367

Student insight into role and clinical experience relevant to criterion:

Assignments throughout core school nurse courses, both didactic and clinical, and Phase I coursework, that gives candidates the necessary assessment tools and insight into lesson planning and teaching, work together to give candidates an understanding for the multi-complex school nurse role and responsibilities in the educational setting.

See also:

N184, N185, N186, N187, completed assignments/journaling stored in Bb courses.

N184, N185, N186, N187 binders of samples of student work on site.

PROGRAM STANDARD 2

Collaboration in Implementing the Program

Collaboration in Implementing the Program Sponsors of the school nurse preparation program establish collaborative arrangements with other institutions and entities that contribute substantively to the quality and effectiveness of the design and implementation of candidate preparation.

***Criterion 1:** These arrangements address significant aspects of professional preparation, and include collaboration between school nurse preparation program providers and local education agencies.*

Collaborative arrangements are made between the university and a school district or County Office of Education that then allows a candidate to take a practicum experience through that particular agency. These arrangements without a doubt contribute substantively to the quality and effectiveness of the design and implementation of candidate preparation. Candidates in the online program reside in areas throughout California. While classroom discussions related to the candidate's field experiences takes place in the online program once classes begin, arrangements for a practicum experience in the candidate's own area must start well before the beginning of the semester. In April of each year, candidates, who have been accepted into the program for the fall semester, receive directions regarding the need to establish themselves with a qualified preceptor as soon as possible. As a start, candidates are asked to speak with their own school nurse supervisor (if practicing as a school nurse) or to contact a school nursing supervisor, or director of Health Services, in their area for assistance in locating a qualified school nurse preceptor (see qualifications below). The credential program coordinator is available to speak with school nurse administrators in behalf of candidates. Once a qualified preceptor has been identified, that perspective preceptor must have the written approval of his/her immediate supervisor to function in that capacity. If there is not a Student Intern Agreement (University-Agency Agreement) in place between the university and that agency, the immediate supervisor is then asked to share the name and contact information of the administrator in that school district or County Office of Education who is responsible for negotiating contracts between agencies. This information is shared with the university Contract Coordinator whose responsibility it is to initiate a University & Agency Agreement between California State University, Fresno and the agency, which may take up to a month or more if school board approval is necessary. Once in effect, the agreement is viable for five years. Once the University-Agency Agreement is in place, the Preceptor-Student Contract can be signed and the candidate is ready to begin his/her practicum experience once the semester begins. Note: At the end of five years, the University-Agency Agreement is renegotiated as necessary.

Arrangements address significant aspects of professional preparation, and include collaboration between school nurse preparation program providers and local education agencies.

Supportive Documentation:

Student Intern Agreement (University-Agency Agreement), **Sec. 3**, p. 412

NURS 186/NURS 187 Preceptor Syllabus, **Sec. 3**, p. 367

***Criterion 2:** Participants cooperatively establish and review the terms of the agreements, including well-defined roles, responsibilities and relationships.*

Qualified and dedicated school nurse preceptors are highly valued and appreciated by faculty in the program. This credential program could not meet the experiential needs of candidates without competent dedicated school nurse preceptors in the field. School nurses who act as preceptors are screened by faculty and must meet qualifying criteria. Each school nurse who serves as preceptor to one or more school nursing students is credentialed and experienced in school nursing and must be jointly selected by the institution and an authorized school district official; and they must be oriented to the roles, rights, and responsibilities of school nursing students and preceptors; and appropriately evaluated, recognized and rewarded by the institution. To qualify as a school nurse preceptor, a school nurse must have five full years of school nursing experience, hold a professional School Nurse Services Credential, and be approved to function in that capacity by an immediate supervisor. The school nurse must also be practicing school nursing at the educational level (elementary or secondary) in which the candidate is expected to take their practicum experience for that particular semester. Preceptors must also submit vitae that are reviewed by the candidate's clinical instructor, who will give final approval of the school nurse to act as the student's preceptor. Preceptor vitae are kept on in the credential program office for four years. Clinical instructors may recommend a qualified preceptor to a candidate or the candidate may locate a potential preceptor through a Director of Health Services in their area who will then be approved by program faculty. Larger school districts are asked to poll their school nurses for volunteers to serve as preceptors each semester. Lastly, before a school nurse can assume the duties of a preceptor, a University-Agency Agreement must be in place as previously noted.

Clinical instructors contact preceptors in the beginning of the semester to express appreciation and to review roles and responsibilities for the preceptor, the student (candidate), and the clinical instructor. Contact information is exchanged and preceptors are strongly encouraged to contact the clinical instructor throughout the semester with any questions or concerns. Conferences between the preceptor, student, and clinical instructor are encouraged as a point of contact and to

clarify issues and resolve any problems. Each semester, between the 7th and 11th week, candidates are held responsible for initiating a mandatory 3-way on-site visit or telephone conference between the preceptor, the clinical instructor and themselves. Candidate responsibility involves arranging date, time, place for the conference and notifying the clinical instructor who will then initiate the conference, either a site visit or a telephone conference for distance learners. The purpose of the conference is an opportunity for the three parties to review student practicum progress, accomplishments, and plans for the remainder of the semester. Preceptors receive a Preceptor Syllabus before the beginning of the semester and candidates are expected to set down with their preceptor and go over the syllabus together, so that both parties have a clear understanding of course expectations. Candidates are also expected to review the course syllabus (NURS186 or NURS187) with their preceptor to give the preceptor insight into course objectives and student assignment expectations which gives the preceptor insight into way to help the candidates meet assignment deadlines. Candidates are also expected to leave a copy of the course calendar with their preceptor.

The preceptor is expected to act as a role model for the candidate and to provide guidance, mentoring, and support. Both the preceptor and the candidate are expected to work out a suitable schedule that will meet the needs of both parties. Preceptors are to work to provide the candidate with a well rounded meaningful clinical experience. Throughout the semester, preceptors are expected to be available to candidates and work directly with them for the prescribed number of hours. At the end of the semester, preceptors are expected to meet with the candidate and to go accomplishments and competencies, discussing strengths and areas that may need further improvement. Candidates have a responsibility to act professionally, work with their preceptor to achieve their goals and objectives, and maintain a congenial working relationship with those in whom they come in contact. The candidate's clinical instructor is to maintain open communication with the candidate and the preceptor and be available to support and encourage. At the end of the semester, students have an opportunity to evaluate their preceptor's performance and effectiveness (See *Student Evaluation of Preceptor Experience*). Faculty reviews these evaluations and uses them to best determine future student placements. If student comments are unfavorable, and it is determined by faculty that the comments are justified, that school nurse is not invited to precept future students.

Appreciation is expressed to preceptors in the beginning of the semester, during conferences, and at the end of the semester. Preceptors are invited to network with faculty at annual CSNO (California School Nurse Organization) conferences during University School Nurse Educator/Student Caucuses. Program faculty members also network with preceptors in the Central Valley area at local school nurse meetings and during CSNO Central Valley Section meetings. Students are encouraged to invite their preceptors to student networking luncheons in their local areas, and to consider inviting them to an appreciation luncheon at the end of each semester. At the end of the semester, the program coordinator sends a letter of thanks to

preceptors, along with a *Certificate of Appreciation*. It is the intention of the program coordinator to also send the preceptor's immediate administrator/supervisor a email expressing appreciation for allowing an employee to act in the capacity of a preceptor, and express appreciation for the preceptor for their professional commitment to mentor a school nurse student(s) in the program.

Participants cooperatively establish and review the terms of the agreements, including well-defined roles, responsibilities and relationships.

Supportive Documentation:

Student Intern Agreement (University-Agency Agreement), [Sec. 3](#), p. 411

NURS 186/NURS 187 Preceptor Syllabus, [Sec. 3](#), p. 366

PROGRAM STANDARD 3

Relationship between Theory, Research and Practice

By design, the school nurse preparation program provides a variety of opportunities for candidates to reflect, analyze, and implement the relationships between theory and evidence based practice related to school nursing.

***Criterion 1:** In coursework, school-based observations and supervised fieldwork, candidates examine education, other theories and research.*

Valuing evidence based practice and as it relates to school nursing practice. Prior to entering the credential program, candidates were required have taken a course in nursing research, as well as a statistics course, so that they will have an initial appreciation for the importance of research in nursing practice. While in core school nurse courses within the program, candidates come to understand the importance of evidence based practice in school nursing. In NURS 184, *Week 2*, candidates have the opportunity to respond to a question that asks them to discuss the impact that school nursing has on school performance and child well-being and the implications for further research findings to validate school nurse interventions in the educational setting. Candidates learn that evidence-based practice means the conscientious, explicit and judicious use of current best evidence in making decisions about the care for clients, and that school nurses must make an effort to keep abreast of evidence based practice through reading current research articles specifically related to school nursing practice. Within the program, candidates have online access to research articles in the National Association of School Nursing *Journal of School Nursing* and the American School Health Association *Journal of School Health*.

Weekly questions in NURS 184 and NURS 185 (seminars) require that candidates read current research articles in order to respond to the weekly research questions in seminar courses. Candidates learn that school nurses cannot rely on intuition, unsystematic observations, pathophysiologic rationale, in providing appropriate care, but must use research and evidence to guide clinical decision making. Thus, evidence-based practice combines the current research-based evidence with clinical expertise and client preferences to make a decision about approaching the care for a specific child or adolescent. This is carried out in the NURS 186 in the clinical practice experience in that candidates must conduct a case study in which they are expected to bring these three concepts together in meeting the healthcare needs of the child. There are journal questions in practicum courses in which candidates are asked to find research articles to read that specifically relate to client care in their clinical practice, and to relate how those findings can be applied in specific situations. Importance of research is also stressed in NURS 185, School Nurse Seminar, *Week 13*, where the benefits of research in school nursing are emphasized. Questions for that week relate to applying research in school nursing, role of the

school nurse in research projects, as well as grant writing and steps to publishing articles and research findings. Candidates in this course are also given the opportunity to do a research paper related to adolescent mental health issues in which they are required to review current research related to the subject matter. Online discussion with regard to evidence based practice also takes place among candidates in practicum courses. Candidates in the post-baccalaureate program are not asked to complete a research project, though they are asked to carry out surveys to determine staff and student interest in programs and health education offerings. Candidates apply theory and clinical knowledge as a basis for decision-making in school nursing practice. The candidate applies theoretical concepts from nursing, the behavioral, social, and public health sciences. The program includes, but is not limited to, the specific theories and clinical knowledge domains delineated below. Students acquire knowledge about theoretical concepts and contemporary issues through nursing courses and coursework in other departments. The credential program is designed to give students opportunities to apply theories and investigate contemporary concerns throughout the core school nurse courses (NURS 184, NURS 185, NURS 186, NURS 187) and accompanying coursework. In the core courses, this may be done through written assignments, responses to weekly research questions, online discussions with peers, participation in small group activities, in accomplishing competencies and skills in practicum experiences as observed by a candidate's school nurse preceptor and evidenced through clinical journaling (see Syllabi). Theories that have been introduced in didactics are applied in clinical experiences (see Matrix and Course Content Analysis). Elementary school age issues, with relative theories and knowledge domain, are studied in NURS184, Introduction to School Nursing, and carried out in NURS 186, School Nurse Practicum I. Issues specific to adolescent health concerns (growth and development, attitudes, mental health, and learning theories, group process,) are addressed in Nursing 185, School Nurse Seminar, and carried out by candidates in their secondary practicum experience in NURS 187, School Nurse Practicum II.

Specific Theories Used by Candidates in the Program

Nursing Theories:

Theory of Care - Neuman's Systems Model/Theory (stress/coping). Margaret Neuman (1979) *Theory of Development in Nursing and Health as Expanded Consciousness*. Neuman's Systems Model is the theoretical foundation of the Nursing Department curricular plan, and adapts very well to school nursing practice. Candidates in the program learn to apply it in helping clients identify and reduce stressors and strengthen lines of defense in coping with internal and external stressors that impact a client's ability to function effectively, thus impacting a child's ability to learn or a family's ability to cope with the pressures of life. It was the theorist's belief that nursing theories should focus on the life process, aspects of the life process related to health, and actions facilitating health. This theory focuses on health as expanding consciousness, and on the relationships among the concepts of consciousness, movement, space, and time.

Self-Care – Dorothea Orem. (1971, 1980, 1985, 1991). *Nursing: Concepts of Practice*. “According to Orem, nursing is one of a family of health care services. The unique focus in nursing is the potential or actual self-care deficits of patients that can be addressed through nursing systems. When self-care deficits are addressed, self-care requisites are met, meaning that actions that persons need to take on their own behalf in the interest of supporting live processes, maintaining structural and functional integrity, and promoting development and well-being are accomplished. This theory relates to the school nurse’s goal in helping clients become independent through taking responsibility for their own health related matters to the degree that it is possible.

Adaptation Model – Sister Callista Roy. (1970). *Adaptation: A conceptual framework for nursing*. The concept of adaptation is a core component of the adaptation model, and it is closely linked with the concept of health. The person, as an adaptive system, is in constant interaction with a changing environment. This person-environment interaction is known as adaptation, and it is reflective of the person’s health. Adaptive responses promote integrity relative to the goals of the human system – survival, growth, reproduction, and mastery – thereby promoting health. A goal in school nursing is to assist the client, in this case school age children and adolescents, to adapt to changes that must take place in order for the client to reach optimal ability to learn.

Transcultural Nursing Model – M. Leininger. (1978, 1992). *Transcultural Nursing: Concepts, theories, and practice*. (New York: Wiley). Health and care behaviors tend to vary transculturally and take on different meanings in different context. Therefore, culturally congruent nursing care cannot be determined through superficial knowledge and limited contact with a cultural group. Leininger contends that nursing care must be based on transcultural knowledge discovered by examining social structure, worldview, cultural values, language, and environmental contexts.... According to Leininger, nursing care actions and decisions that recognize and respect cultural care values of people will result in congruency and will prevent cultural imposition, cultural care negligence, and cultural care conflicts. This is a very important model in school nursing practice, as the school nurse student must be able to work effectively with children, adolescents, and families from various ethnic and culturally different backgrounds other than their own.

Community Nursing Practice Model – (Parker & Barry, 1999) is a conceptual framework that guides practice, program development, and research. The model, developed from essential values, is a dynamic and creative flow of concentric circles depicting the complexity and interconnection of relationships and services directed toward the well-being of individuals and communities. The model provides a framework for school nursing practice grounded in the core values of respect and caring. It guides practice by focusing on promoting the well-being of individuals and communities while reaching out

to and through the circles to build and strengthen relationships and connections in the broader context. Instrumental values, values that bring the core values of life, have been adopted from the World Health Organization (1978). These are access, essentiality, empowerment, community participation, and intersectoral collaboration, interrelated themes of person, nursing, community and environment contribute to this model.

Major theories of development:

Piaget, Cognitive (1952); Erikson, Psychosocial (1963); Kohlberg, Moral Development (1971) - These theorists theorize that growth and development generally proceeds in an ordered sequence based on discernible developmental stages. Further, that growth and development are regarded as an epigenetic process, where each new stage is built on previous stages that depend on successful resolution of critical development tasks at each stage. Precise labeling of those stages depends on the theorist and developmental area.

Family Theoretical Concepts:

Family Systems Theory (Kerr & Brown) views the family as a whole system that continually interacts with its members and the environment. A change for one member results in change in another. Forces outside the family, such as the school system can influence the family system. *Family Stress Theory* is useful in examining family stressors and strengths as well as resources in adaptation and restoring family stability (Boss, 2002). *Family Development Theory* is also a useful approach in studying family patterns, the dynamic nature of the family, and how change occurs in the family.

Hierarchy of Needs:

Maslow's Hierarchy of Needs (1954). Students may use this to prioritize client problems. According to Maslow's hierarchy, man's most basic needs, which must be satisfied first, are physiological needs for food, water, sex, clothing, and shelter. At the next step in the hierarchy are safety needs, which include both physical and economic security. The third rung in the hierarchy includes belonging needs, such a membership in a family and other groups, maintaining friendships, and feeling accepted by others. Above that level is man's need for respect, which includes self-esteem, status and prestige, and recognition for one's achievements. At the top of the pyramidal is man's need for achieving his fullest potential, which is called self-actualization. According to Malow's theory, man cannot achieve his potential until all his lower level needs (physiological, safety, belonging, and respect) are satisfied because his energy, both physical and psychic, is tied up with lower levels attending to more urgent needs. Theoretically, then, unless the client can be assisted in meeting lower level needs, he may never be able to achieve higher-level wellness and self-actualization. This is important for school nurses to understand in

attempting to assist children, adolescents, and their families solve problems which may be directly or indirectly contributing to their ability to function and health and well-being.

Learning Theory Relevant to the School Nurse as Health Educator

Constructivist learning theory (Danielson 1996), the constructionist approach to learning emphasizes that learning takes place when the learner is able to make sense of the concepts for themselves when combined with emotional maturity and motivation of the learner. Learning takes place when the learner is able to construct the meaning of the experience in the real world, i.e., moving from simple to complex, concrete to abstract, and directional to comprehensive. Developmental variations, individual learning styles, and environmental factors all need to be considered when helping a learner see the world from a new perspective. The constructionist approach challenges the teacher to recognize that the learner needs to make sense of the experience themselves. They have to examine the meaning and its applicability and make a decision as to how this can be used to change their behavior. School nurses can use Danielson's framework when implementing the role of educator. The clarity and simplicity of the framework makes it transferable to any teaching situation and it is supported by premises of major learning theories.

Management (Role Theory for the School Nurses) Theoretical Concepts:

Scanlan's definition of management (1974) "The coordination and integration of all sources (both human and technical) to accomplish specific results" is referred to here. Students are encouraged to view themselves as managers of school health programs and leaders. Those managerial functions are: Planning, organizing, directing, heading, and controlling. Steven's (1978) view leadership as one of the functions essential for effective management. Leadership refers to one's ability to influence others to follow or to take directions. For a manager to be successful, strong leadership must be exercised. (Wold,1981, pp.399-435).

Ethical Decision Making Theories:

Mila A. Aroskar (2001) Exploring ethical challenges in school health. *Legal Issues in School Health Services*, 81-93, states "The effectiveness of school nurse practice can be enhanced when the nurse is aware of the potential for ethical dilemmas. When the School Nurse stops to consider how the ethical principles of beneficence, autonomy, justice, and non-maleficence, the risk of paternalism, and the professional code of ethics are operative in a family intervention. The development of a positive nurse-family relationship is supported." Through a NURS 184 assignment (week 14), students gain insight into different ethical theories, i.e., Virtue or Character Theory, Principle-based theories (duty-based and consequence-based), the Theory of Care, and the Communitarian (community-based) Theory, that can be applied to their school nursing practice.

Other theories which for useful in school nursing and in completing assignments:

Communication Theories – The following website provides candidates with a rich resource of information for understanding of communication theories and theoretical fieldwork in this area. School nurses must be able to communicate effectively. Here students can find specific communication theories of value to them in their school nursing practice. <http://www.tcw.utwente.nl/theorieenoverzicht/>

Health Promotion Theories – Theories of health-related behaviors, the process of changing behaviors and community and environment factors that influence behavior. Candidates in the program learn to understand the fundamentals of health promotion and the important role the school nurse plays in promoting a healthy life style for children, families, school staff, and community. This is demonstrated in practicum courses. <http://www.nci.nih.gov/cancerinformation/theory-at-a-glance/page1>

Use of Theory in Courses

Stress and Coping	COUN 174/200, N184, N185, N186, N187
Self-Care	N184, N185, N186, N187
Adaptation	N184, N186, N187
Community Nursing Practice Model	N184, N186, N187
Transcultural Theory	N184, N186, N187
Ethical Decision Making	N184, N186, N187
Growth & Development	N136, N184, N185, N186, N187
Family	COUN174/200, N184, N186, N185, N187
Hierarchy of Needs	N184, N185, N186, N187
Management	N184, N186, N187
School Nurse Role	N184, N185, N186, N187
Communication	COUN174/200, N185, N187
Counseling	COUN174/200, N186, N187
Crisis Intervention	COUN174/200, N185, N187
Health Promotion	N1184, N185, N186, N187
Learning/Motivational	N137, N184, N185, N186, N187
Adolescent Theories	N185, N187
Ethical Theoretical Concepts	N184, N186, N185, N187

Criterion 2: *Candidates examine education, other theories and research, and their relationship to student health and wellness.*

Candidates learn to use theories that are very relevant the school nurse's goal, both in seeking optimal health and wellness for clients through health care interventions and in health teaching and health promotion. Examples of these are: Neuman's Systems Model, which the candidate can use to strengthening lines of defense against internal and external stressors; Orem's Self-

Care, that emphasizes independence and responsibility on the part of the client in taking responsibility for self-care; Roy's Adaptation Model, that seeks to move the client to adapt to internal and external changes in their lives; and Leininger's Transcultural Theory, which sheds light on caring with those of other cultural backgrounds. Candidates also learn that it is necessary for them to have insight into developmental theories and learner readiness; family theoretical concepts, and Maslow's Hierarchy of Needs, which must be met before other problems can be resolved.

Candidates recognize that school nurse must reflect on proven research, as well as established theory and planned outcomes identification in order to expect measurable outcomes in school nursing practice resulting from specific nursing interventions. Candidates are expected to develop care plans based on research related to the health problem and use the Nursing Process in assessing and identifying outcomes. In caring for clients, candidates must validate not only what was done and how well it was done, but also to examine the impact of the nurse's skills and knowledge with measurable outcomes. Outcome measurements provide objective evaluative evidence related to the healthcare process. The measurement of outcomes is essential in demonstrating the effectiveness of nursing care delivery (Hill, 1999).

In planning health lessons and health promotion, candidates are expected to measure learning outcomes as a result of their efforts. They are expected to know their target audience with regard to age, learning capability and ethnic differences that must to be taken into consideration. Candidates are expected to research teaching methods, classroom management, and learning theories, appropriateness of subject matter, as well as identify age appropriate learner readiness (spelled out in CDE (2003) *Health Framework for California Public Schools: Kindergarten through Grade Twelve*), CDE (2008) *Health Education Content Standards*, and relevant sections of the CA Education Code, before selecting subject matter and developing a teaching plan and outline. In planning to meet the health care needs of school age children, or discuss health related issues with a child's family, candidates are expected to keep Leininger's Cross-Cultural Theory in mind and to familiar themselves with research relevant to any ethnic and cultural differences that may impede their ability to effectively meet the needs of the client. Candidates are expected to develop relevant healthcare plans based on client needs, current research, and use the Nursing Process in assessing and identifying outcomes.

Candidates examine education, other theories and research, and their relationship to student health and wellness.

Supportive Documentation:

Criterion I Matrix relevant to theories – [Sec. 2](#), p. 30

N184 and N185 Weekly Questions Booklets, [Sec. 3](#), p. 136 and 261

N186, N187 syllabi, [Sec. 3](#), p. 199 and 328

Examples of Student Assignments relevant to criterion:

N184, weekly questions relevant to health education, week 10

N185, Research Paper on adolescent mental health issues

N186, Health Teaching Plan and Classroom Teach

N187, Health Education Curriculum Proposal and Teach

Aggregate Teaching/Small Group Activity

See also:

N184, N185, N186, N187 binders of samples of student work on site.

N184, N185, N186, N187, completed assignments stored in Blackboard courses.

***Criterion 3:** Candidates examine education, other theories and research, and their relationship to school and community health.*

In NURS 184, Introduction to School Nursing, the importance of seeing school nursing practice from a global perspective is stressed. Candidates gains insight into the fact that in order to meet the needs of school age children, adolescents, and families the school nurse must reach well beyond the school building and develop meaningful relationships within the community (See NURS, *Week 8*, i.e., Community Nursing Practice model, use of a School Health Index, cultural competent care, helping students and families cope with stress). Candidates learn about the Community Nursing Practice model which is an excellent guide that helps the candidate understand school community and beyond. The model is a conceptual framework that guides practice, program development, and research (Parker & Barry, 1999). The model, developed from essential values, is a dynamic and creative flow of concentric circles around a core, the substance of the core being unique lived experiences of staff and faculty with those receiving care. These services provided to students, school staff, and families from the community, as a direct result of efforts and involvement on the part of the school nurse, occur in frequently overlapping categories of care as: design and coordinate care; primary prevention and health education; secondary prevention (health screening and early intervention); tertiary prevention; and nurturing wholeness, which includes respecting self-care practices, honoring lay and indigenous care, inviting participation; and providing culturally competent care.

In NURS 186, School Nurse Practicum I, and NURS 187, School Nurse Practicum II, candidates put into practice the various aspects of the concentric circles within the Community Nursing Practice Model. The first circle includes persons and groups in each school and community who share concern for the well-being of persons served at the center (students, staff, families, and relevant others). Candidates understand that the school nurse is the health professional that the school community looks to for leadership in working to bring about optimal levels of wellness for students and staff through assessment, health promotion and health education, evaluation of relevant safety issues and control of communicable disease. The second circle includes structured and organized groups whose members also share concern for the education and well-being of the persons served at the center but within a wider range or jurisdiction - such as a district or county (policy making groups, i.e., the school district and county health department). Candidates in the program recognize that school district policy must be understood and adhered to as it relates to school nursing practice, i.e., health education guidelines, excusing students from school during school hours, exclusion policies, etc. The candidate also recognizes the importance of community agencies and the need to develop insight into the various services available to children, adolescents, and families. To this end, candidates are required to spend a specific number of hours each semester in the community becoming acquainted with these agencies and services. Candidates are to acquaint themselves with other groups with an interest in the well-being of clients such as parent groups and other interest groups. Candidates in NURS 184, Introduction to School Nursing, have an assignment in which they are required to attend a school board meeting and to write a paper related to the experience and the role of the school board as it relates to the education and well-being of school age children. Candidates are also expected to gain insight into the role of SARB (Students Attendance Review Board) and to attend a SARB board meeting to gain insight into the role of school district and community in keeping kids in school. The third circle includes state, regional, national, and international organization members from whom consultation or funds are sought – building relationships and community with members and collaborating about scholarship, policy, outcomes, practice, research, educational needs of school nurses. Early in the program, candidates are given information on the value of their professional organizations at the state, national, and international level, that contribute so significantly to professional school nursing practice, i.e. professional standards of practice, position statements, journal articles and published research that validates best nursing practice, educational offerings, and networking opportunities that benefits their school nursing practice. Candidates also learn about state and federal legal guidelines that guide school nursing practice. In NURS 185, School Nurse Seminar, *Week 13*, candidates are required to spend time specifically involved in gaining insight into the benefits of research and its importance in validating school nursing practice. They also have the opportunity to find out more about funding sources and grant writing activities. In NURS 187, School Nurse Practicum II, candidates are expected to seek opportunities to participate in research projects, i.e., surveys, data gathering, and other activities as time allows.

Candidates examine education, other theories and research, and their relationship to school and community health.

Supportive Documentation:

Criterion I Matrix relevant to theories – [Sec. 2](#), p. 30

N184, N185 Weekly Questions Booklets – [Sec. 3](#), p. 136 and 261

N186, N187 syllabi – [Sec. 3](#), p. 199 and 328

Examples of Student Assignments relevant to criterion:

N184, School Board Meeting and write up

N185, Respond to a question related to benefits of research

N186, Attend a SARB meeting and discuss in journal question

N187, Encouraged to participate in research projects – data gathering, surveys, etc.

See also:

N184, N185, N186, N187 binders of samples of student work at site.

N184, N185, N186, N187, completed assignments stored in Blackboard courses.

Criterion 4: Candidates examine education, other theories and research and their relationship to student achievement.

Candidates learn that the most important responsibility the school nurse has is to assist school age students in achieving an optimal level of wellness in order to be ready and able to learn. Theories previously discussed aid the school nurse in accomplishing this. Candidates understand that the school nurse can contribute to *learner engagement*, both through care provided in the health office and content taught in the classroom. They also come to understand that the school nurse has a responsibility to identify barrier to student learning, i.e., basic survival needs, threats to safety, and health problems that interfere with learning, and to help these clients resolve those issues. Through awareness of current studies related to student achievement issues in public schools, such as the one by the California Department of Education special task force on factors that affect student achievement (2002) *Learning, Teaching, Leading*, articles related to issues in education, and research articles relevant to their own school nursing practice and practicum experience, candidates are able to in turn apply this insight and research in to their school nursing practice in order to achieve favorable outcomes in health promotion, health education and their client care, so that school age students can reach a level of optimal learning ability.

In practicum courses, NURS 186 and NURS 187, before candidates teach a health lesson in a classroom or participate in a program related to health promotion, they are expected to examine theories relevant to student achievement, i.e., Danielson's Constructivist learning theory (1996); developmental theories such as those of Piaget, Erikson, and Kohlberg; as well as relevant teaching strategies and the California Department of Education (2003) *Health Framework for Public Schools in California: Kindergarten through Twelfth Grade* for age appropriate subject

matter and learner readiness. Candidates must also be aware of other theories that relate either directly or indirectly to student achievement such as those described previously, i.e., Neuman Systems Model as it relates to strengthening lines of resistance at the primary intervention level, through health teaching and health promotion to prevent damage to health and well-being; secondary level, through identifying and resolving health related barriers to learning; and tertiary level, through helping clients with disabilities and chronic health conditions to gain and maintain optimal levels of wellness in order to learn; health promotion theories, and nursing models and theories that directly or indirectly relate to a client's ability to learn.

Candidates examine education, other theories and research and their relationship to student achievement.

Supportive Documentation:

Criterion I Matrix relevant to theories – [Sec. 2](#), p. 30

N184, N185 Weekly Questions Booklets – [Sec. 3](#), p. 136 and 261

N186, N187 syllabi – [Sec. 3](#), p. 199 and p. 328

Examples of Student Assignments relevant to criterion:

N184, Wkly questions related to theories and learning strategies specific to children

N185, Wkly questions related to theories, research, strategies related to adolescents

N186, Lesson development and classroom teach

N187, Facilitation small group activity or development of relevant curriculum

See also:

N184, N185, N186, N187 binders of samples of student work at site.

N184, N185, N186, N187, completed assignments stored in Blackboard courses.

PROGRAM STANDARD 4

Preparation to Promote Student Health and Wellness

The program prepares candidates to integrate health and wellness concepts in the educational setting to allow students to be in school, healthy, and ready to learn.

Criterion 1: Candidates recognize the need to integrate health and wellness concepts in the educational setting in the area of health education and health promotion in order to bring about positive behavioral changes among school age children and adolescents, as well as role models in faculty and staff.

Once candidates enter the core school nurse courses (NURS 184, 185, 186, & 187) they quickly become familiar with NASN standards of nursing practice that the candidate can then begin to understand how apply the Nursing Process in the school setting in meeting the healthcare needs of individual school age children and in development of various screening and health education programs to maximize health and wellness through health promotion and health education (Standard 5b). Candidates also become acquainted with relevant sections of the CA Education Code that relate to school nursing practice. Candidates learn about imperatives for health education, including *Healthy People 2010* goals, which include focus areas with goals and selected school-related objectives which they can use as a guide in developing realistic health education offerings. Candidates also learn that the responsibility for health promotion and health education needs to be a collaborative effort and is best accomplished through partnering with teachers and/or through participating in the development of coordinated school health programs that involve a joint effort with teachers, families, and community. In preparing candidates as health educators, candidates are required to take NURS 137, Teaching Perspectives for the Healthcare Client, in which they gain insight into learning theories, lesson planning, and curriculum development. In NURS 184, Introduction to School Nursing, candidates are expected to familiarize themselves with a conceptual model, the constructionist approach (Danielson & McGreal, 2002), for effectively teaching of school age children and adolescents in the school setting which they can use in developing a health lesson plan to teach in NURS 186, School Nurse Practicum I (elementary) or NURS 187, School Nurse Practicum II (secondary). In NURS 185, candidates gain insight into the Group Process and the art of facilitating a small group, which they can then use in facilitating small group discussion on an adolescent health issues at the secondary level in NURS 187, School Nurse Practicum II. Candidates are also expected to follow guidelines for grade/age appropriate health education and learner readiness found in the CDE (2003) *Health Framework for California Public Schools: Kindergarten through Grade Twelve* and CDE (2010) *California Health Education Content Standards: Kindergarten through Grade twelve* in developing relevant and appropriate health curriculum and teaching plans.

With regard to faculty and staff health promotion, through *Healthy People 2010* candidates gain insight into the essential components of a comprehensive worksite health promotion program, i.e., health education that focuses on skill development and lifestyle behavior changes in addition to information dissemination and awareness building, preferably tailored to employees' interest and needs, supportive social and physical environments, integration into the organization's structure, screening programs, etc. In didactic coursework candidates learn about the importance of including faculty and staff in health education and health promotion programs, recognizing the health adults are role models for youth, and that healthy teachers mean continuity of education for students and fewer sick days for employees. Candidates learn how to use the Coordinated School Health Program Model which outlines a nine-step process for developing a school-site health promotion program. Candidates also learn that the CDC School Health Policies and Programs Study has specific recommendations for school staff health promotion (CDC, 2001) and the purpose of the CDC School Health Index that related to school site self-assessment in order to plan health promotion programs and address other health related needs in the school community. (See NURS 184, Introduction to School Nursing, weeks 7 and 10).

Criterion 2: Candidates are knowledgeable about primary (disease prevention and health promotion), secondary (health screening, emergency, and acute care) and tertiary (rehabilitative or palliative care) levels of health care intervention as these relate to students and their families:

While candidates are registered nurses who are aware of the levels of prevention and care, this subject matter is covered throughout the core school nurse courses and specifically addressed in NURS 184, Introduction to School Nursing, in Wk 4 as it relates to the role of the school nurse.

Primary prevention (promoting health and preventing disease among school age children and adolescents susceptible to disease with no known pathology) is covered in seminar courses for examples, in NURS 184 (elementary seminar), candidates learn about coordinated school health programs related to health promotion and disease prevention (Wk 2); prevention through immunization requirements and other programs (Wk 5); health promotion and the role of the school nurse as health educator (Wk 10). In NURS 185 (secondary seminar), candidates relate primary prevention to coordinated school health programs at the secondary level (Wk 2); adolescent preventive services and health promotion (Wk 3); the school nurse as health educator at the secondary level, The Group Process, and facilitating small groups on topics related to prevention (Wk 4); adolescent fitness (Wk 5); health promotion and education related to substance abuse prevention (Wk 6); health promotion and education related to sexually transmitted disease prevention (Wk 7); health education as it related to healthy teen pregnancy (Wk 8); and mental health issues (Wk 9). In Practicum courses (NURS 186 and NURS 187), candidates have ample opportunity to strengthen their ability as health educators in the school setting, in health promotion through counseling with individual children and adolescents, facilitating discussion with small groups on various health related topics, through presentations

to faculty, staff, and community groups, and through presenting health lessons in the classroom. Candidate competency in these areas is determined by qualified school nurse preceptors and clinical instructors.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists - E1 through E19 and S1 through S18 for candidate competencies and skills in the area of Primary Prevention.

Secondary prevention (detecting disease in early stages in order to reverse or decrease the severity of the disease outcome, which includes persons who may not exhibit clinical signs) is addressed throughout the core school nurse coursework. Candidates not only understand the importance of screening to detect health related problems that may impact learning, they also understand the importance of health teaching and health promotion as it relates to helping school age children, adolescents, and families adapt and care for adjustments, such as corrective tools and equipment, that may be necessary following referral and evaluation. In prerequisites to core school nurse courses candidates are required to take *Audiometry for School Nurses* (3U), *Health Assessment for School Nurses* (3U), *Introduction to Counseling* (3U), as well as *Vision and Scoliosis Screening in the School Setting* (1U) or equivalent coursework approved by the program coordinator prior to entering core school nurse courses. These prerequisite courses give candidates the necessary tools needed to screen, interview, and assess those who may have unsuspected health conditions and those with suspected health conditions that impact the child's or adolescent's ability to learn. In core school nurse courses candidates learn about the various sections of the California Education Codes that relate to mandated screening requirements and guidelines, i.e. vision, hearing and scoliosis. Screening programs, as well as planning strategies and tools for conducting classroom/school wide screening, are addressed in different aspects of the core school nurse courses. For example in seminar courses are as follows: NURS 184, Introduction to School Nursing (elementary) – Role of the school nurse in Child Health and Disability programs (Wk 5); screening programs related to BMI (body mass index), nutritional needs, normal growth and development, identifying barriers to learning through assessment (Wk 6); use of the *School Health Index* in schools, cultural/ethnic backgrounds and tendency toward related health issues, health concerns among migrant and homeless, dental screening programs (Wk 7). Examples in NURS 185, School Nurse Seminar (secondary), School nurse responsibility as it relates to understanding adolescent growth and development, helping teachers deal with stress (Wk 1); understanding adolescent behavioral issues (Wk 2); adolescent preventive services (Wk 3); nutrition and weight control among adolescents, female athlete health issues (Wk 5); adolescent addiction and substance abuse identification and intervention (Wk 6); counseling and referral for suspected sexually transmitted diseases (Wk 7); pregnancy counseling, referral, and follow-up (Wk 8); assessment and counseling related to various suspected mental health disorders, anxiety, self mutilation (Wk 9); counseling and referral for suspected depression,

threat of suicide (Wk 10); use of school based health clinics for screening and treatment of adolescent (Wk 11). In Practicum courses (NURS 186 and NURS 187), candidates have ample opportunity to participate in screening and assessment individual school age children and adolescents, as well as to participate in various screening teams where they gain insight into screening techniques and have the opportunity to develop their case findings and assessment skills. This includes, but is not limited to screening school age adolescents for vision, hearing, scoliosis, dental problems, BMI, nutrition, as well as communicable diseases, acute and chronic health problems, mental health issues and various other conditions that have the potential to limit a student's ability to learn. Candidate competency in these areas is determined by qualified school nurse preceptors and clinical instructors.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists - E1 through E19 and S1 through S18 for candidate competencies and skills in the area of Secondary Prevention.

Tertiary prevention/intervention (includes ameliorating the course of disease, reducing disability, including rehabilitation involving persons with clinical manifestations of disease). Candidates gain insight into the purpose of tertiary prevention which is to interrupt the progression of a condition in order to decrease the amount of morbidity or complications that are possible. Candidates gain insight into the importance of sound health teaching and health promotion, as well as case management of school age children and adolescents who have been identified as having chronic health conditions that significantly impact their lives and frequently their ability to reach optimal levels of ability to learn. Prerequisite to core school nurse courses prepare candidates to work effectively to help these children and adolescents. These courses are COUN 174 (or 200), Introduction to Counseling, in which the candidate gains insight into effective counseling techniques that aid the candidate in interviewing clients and families; SPED 120, Mainstreaming Exceptional Students, that gives the candidate insight into programs and rights of individuals with disabilities; and NURS 136, Health Appraisal, which gives candidates insight into appropriate health assessment techniques in determining deviations from the norm. In NURS 184, Introduction to School Nursing (seminar), subject matter related to tertiary prevention/intervention is addressed. For example: The role of the school nurse in caring for children and adolescents with chronic conditions such as asthma, attention deficit disorders, diabetes, seizure conditions, Cystic Fibrosis, severe allergies, Sickle Cell disease, and mental health issues are covered in Wks 8, 9, & 11; health teaching techniques in Wk 11; Individuals with disabilities in Wk 12; the IEP process, mainstreaming, and advocacy for children and families in Wk 13; and care of the medically fragile and those with special health care needs, and supervision and training of unlicensed personnel to care for children with special needs is covered in Wk 15. In practicum courses (NURS 186 and NURS 187), candidates participate in case management of students with complex health related issues; learn to develop individual

health care plans and emergency action plans for those with special needs; participate in supporting, counseling, and teaching children, adolescents, and families about their health conditions and assist clients in taking responsibility for self care, offering students and families support and directing them to appropriate resources; as a member of the education team at school sites candidates participate in the planning process specific to the school nurse role in finding appropriate educational placement of students needing special education programs or 504 plans to accommodate their learning needs in the classroom.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E20 through E30 and S19 through S30 for candidate competencies and skills in the area of Tertiary Prevention/intervention.

Criterion 3: In order for students to be optimally ready to learn, the program ensures the candidate understands and can effectively apply the critical concepts of health and wellness within the school setting. These include, but are not limited to:

Promoting school safety, including disaster preparedness:

Candidates have the opportunity to respond to a research question in NURS 184, Introduction to School Nursing, a question in week 5 asking the candidate to discuss the role of the school nurse in evaluating playground safety at an elementary school and to include in their response what should be included in a playground injury prevention plan. In week 7, candidates may choose to discuss the role of the school nurse in participating in a school wide program to address individual safety relate to bullying. In NURS 185, School Nurse Seminar, Week 11 is entirely devoted to school safety issues such as the role of the school nurse in promoting safety and involvement in school wide disaster planning, crisis intervention and post-vention, emergency action plans, collaboration in school safety, identifying gangs and gang related violence, hate motivated behavior and anger management. In practicum courses, students are expected to become familiar with the school wide emergency plans at the school sites at which they are assigned, understand the role of the school nurse in the event of a disaster or crisis incident, to participate in planning an emergency action plan if the opportunity arises, to be area of potential dangers in the neighborhood, to become familiar with signs of gang activity in their area, to be aware of threats to individual students such as bullying, and to be prepared for the role of the school nurse in a disaster, i.e. as first responder, triaging, counseling, etc. Candidates are also expected to be knowledgeable about potential environmental health hazards such as mold, and playground safety issues.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E8, E9, E22, E30 and S6, S7, S30 for candidate competencies and skills in the area of school safety promotion and school wide disaster preparedness.

Delivering first aid and emergency care:

A requirement for all candidates entering the program is a current First Aid and CPR certificate which needs to be kept current throughout the program. Prior to entering core school nurse courses, candidates must also take NURS 136, Health Appraisal with gives them the skills necessary to assess various health concerns and complaints. In seminar courses (NURS 186 and NURS 187) first aid and emergency care is addressed; in NURS 184, Introduction to School Nursing, Wk 8, a weekly question asks the candidate to outline the assessment and first aid steps in managing various injuries and other types of complaints. In NURS 185, School Nurse Seminar, Wk 5, questions relate to the role of the school nurse in managing common sports injuries and emergency first aid. In practicum courses at the elementary and secondary levels (NURS 186 and NURS 187), candidates have the opportunity to spend time working under the direct supervision of a qualified school nurse at a school site assessing student complaints of illness or injury who come into the health office, those injured on the playground or in P.E., and those who require emergency care in the classroom, i.e., seizures.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists - E20, E21, E22, E23 and S19, S29 for candidate competencies and skills in delivering first aid and emergency care to students, faculty and staff at the elementary and secondary levels.

Identifying and accessing local community and public health resources:

Community health coursework is required as a prerequisite to entering the program. It is the strong belief of program faculty that the school nurse must have a global understanding for community health issues and knowledge of relevant resources in the community in order to meet the needs of the school age children, adolescents, and families they serve. Most candidates enter the program having completed a BSN program that includes community health coursework leading to a PHN. Candidates entering the program having completed a bachelor's degree in another field are required to complete community health coursework, both didactic and field experience, at the university. Though a PHN is not required, importance is placed on the need for candidates to know and understand community health needs, issues, and resources. California State University, Fresno offers community health coursework through the RN to BSN program, NURS 141, Concepts in community Health (3U), and NURS 141L, Practicum in Community Health Nursing (3U) in which application of primary, secondary, and tertiary prevention in the community with individuals, families, and groups is addressed. The importance of community involvement is stressed in core school nurse courses. In NURS 184, Introduction to School Nursing, community outreach is covered in the following areas: Coordinated school health programs which includes community outreach (Wk 2); community collaboration (Wk 7). In NURS 185, School Nurse Seminar, community outreach is covered in the following areas: Coordinated school health programs, adolescent and family involvement (Wk 2); disease

prevention for adolescents through coordinated programs (Wk 3); accessing community resources as they relate to primary, secondary, and tertiary prevention and intervention regarding adolescent involvement with substance abuse, unsafe sexual behavior and sexually transmitted diseases, pregnancy, and mental health issues (Wks 6, 7, 8, and 9); school based clinics, community partnerships (Wk 12). In both practicum courses, NURS 186 and NURS 187 (elementary and secondary respectively), candidates are required to spend 8 to 10 hours each semester becoming acquainted with community resources relevant to each of these educational levels through actually visiting community agencies and programs and being involved in other community activities such as participating in community health fairs or planning a health fair where agencies are invited to a school site.

See Sec. 3 (p. 396): NURS 186 Preceptor Syllabus checklists – E6 and S4 for candidate competency in identifying and accessing local community and public health resources.

Addressing public health issues in the community that may affect schools:

Program faculty realizes that the school nurse cannot remain isolated in the school building without knowledge of what is taking place in the community. As noted above, Community health coursework is required as a prerequisite to entering the program. Candidates are expected to have a global understanding for community health issues and knowledge of relevant resources in the community in order to meet the needs of the school age children, adolescents, and families they serve. Most candidates enter the program having completed a BSN program that includes community health coursework leading to a PHN. Candidates entering the program having completed a bachelor's degree in another field are required to complete community health coursework, both didactic and field experience, at the university. Though a PHN is not required, importance is placed on the need for candidates to know and understand community health needs, issues, and resources. California State University, Fresno offers community health coursework through the RN to BSN program, NURS 141, Concepts in community Health (3U), and NURS 141L, Practicum in Community Health Nursing (3U) in which application of primary, secondary, and tertiary prevention in the community with individuals, families, and groups is addressed. In practicum courses (NURS 186 and NURS 187) candidates are expected to, not only spend 8-10 hours visiting and becoming acquainted with community resources and gaining insight into health issues in the community; they are also expected to spent 10-12 hours each semester during their practicum experiences attending community meetings where health issues are discussed, i.e., school nurse meetings and conferences, meeting for health care providers put on by local health departments, and community forums addressing health issues. Candidates are expected to participate in community screening programs, i.e. tuberculosis case follow-up, meningitis, flu, etc. that may occur during their practicum experience. Working under the supervision of a qualified school nurse preceptor, candidates are expected to gain insight into steps that are necessary to prepare the school community to meet the challenges of public health

threats such as the HINI flu, i.e. notification if school community and families, health education (effective hand washing techniques and coughing techniques) in and outside of the classroom, use of other recommended precautions, establishment of guidelines for exclusion and readmission to school, and staying informed themselves through communication with the local public health department and CDE advisories.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E6, E9 and S4, S7 for candidate competency in addressing public health issues in the community that may affect schools.

Addresses student, family and community mental health and wellness:

Candidates who enter the program have a background of understanding for mental health and wellness issues. These were addressed in undergraduate nursing programs through sociology and psychology courses, psychiatric affiliation, and in their community health nursing experiences. In the program, candidates learn about the value of coordinated school health programs, use of the School Health Index, and value of surveys in determining health education needs in the school community. As a prerequisite to practicum courses (NURS 186 and NURS 187) candidates are required to take an introduction to counseling course, COUN 174 or COUN 200, which prepares them to use effective counseling techniques and interviewing techniques with both students and families in discussing student and family concerns. Mental health and wellness addressed in NURS 184, Introduction to School Nursing, examples: Employee job satisfaction, Wk 4; identifying barriers to healthy lifestyle for children (Wk 6); helping students and families cope with stress (Wk 7); anxiety disorders and behavioral issues (Wk 11); acting out behaviors, school phobia, children of dysfunctional families (Wk 12); supporting parents of special needs children (Wk 13). In NURS 185, School Nurse Seminar, examples: Adolescent behavior and impact on health and learning, teacher stress (Wk 1); coordinated school health programs and adolescent health issues (Wk 2); adolescent preventive services, health education, school nurse as health educator (Wk 3, 4); adolescent activity and fitness (Wk 5); health promotion and education as it relates to substance abuse, unsafe sexual activity, pregnancy (Wks 6, 7, 8); psychiatric disorders, behavioral and emotional issues, depression and suicide, stress and self injury, eating disorders, date rape, hate motivated behavior and anger management, role of the school nurse in counseling and psychosocial interviews (Wks 9, 10, 11). Under the supervision of a qualified school nurse preceptor in practicum courses (NURS 186 and NURS 187), candidates have the opportunity to interview and teach school age children, adolescents, and families regarding a variety of health related issues. At the secondary level, candidates have excellent opportunities for health promotion and to teach, interview and counsel adolescents working through personal crises in their lives, i.e. substance abuse issues, suspected sexually transmitted diseases, pregnancy, emotional issues, depression, and possible threatened suicide.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E4, E5, E11, E12, E18, E31, E34, and S2, S3, S10, S11, S13, S15, S21-26, S31, 232 for candidate competency in addressing student, family and community mental health and wellness issues.

Promoting nutrition and fitness:

In core school nurse courses, candidates gain insight into growth and development and age appropriate nutritional needs and physical fitness needs of school age children and adolescents, as well as the additional nutritional needs of athletes. In NURS 184, Introduction to School Nursing, subject matter is addressed: The school nurse role in keeping children with food allergies safe at school through educating and working with teacher, families, and students (Wk 5); assessment of growth and development of the school age child, calculating body mass index, promoting a healthy lifestyle among school age children (Wk 6); promoting healthy eating in school, assessing school nutrition services (Wk 7); intervention in the cycle of childhood obesity (Wk 9). In NURS 185, School nurse seminar, examples where subject matter is addressed: The role of the school nurse in understanding adolescent growth and development (Wk 1); adolescent physical activities and fitness, nutritional needs of the young athlete; and identification, counseling, and referral of students with eating disorders (Wk 9). In practicum courses (NURS 186 and NURS 187) candidates have many opportunities to carry out health assessments on school age students and adolescents during their clinical experience with a qualified school nurse preceptor. In NURS 186, candidates are asked to complete a case study on a school age child which includes a nutritional assessment, giving the candidates the opportunity to do some teaching and health promotion with the family. Candidates frequently choose nutrition as a topic to teach as a lesson in the classroom at the elementary level or individually with students with special needs such as students with diabetes, and/or facilitating discussion among small groups at the secondary level, i.e. pregnant teens, athletes, others.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E13, E31, and S11, S22, S24 for candidate competency in promoting nutrition and fitness among school age children and adolescents.

Addressing specialized healthcare needs of students, including special ed. students:

Throughout the core school nurse coursework candidates gain insight into the care of students with special needs, including those in special education programs and the medically fragile. The care of students with special needs is addressed in seminar courses and candidates are exposed to caring for these students in the school setting in practicum courses at the elementary and secondary levels. Candidates learn that an important school nurse function is to develop

healthcare plans for individual school age children with special needs in regular education and in special education programs, and for families with a child in an early intervention program. These include Individualized Health Care Plans, i.e. for students with diabetes, Sickle Cell Disease, Cystic Fibrosis, etc.; Individualized Family Service Plans related to early childhood; 504 Plans for students who need special accommodations or nursing services in a regular classroom; and Emergency Action Plans for students with conditions that can become life threatening. Candidates also learn about the role of the school nurse as a member of the IEP (Individualized Education Program) team. Candidates understand that the plan must be specific to the client or family and must be developmentally, culturally, and environmentally appropriate, seeking to safeguard the student and promote health and prevent disease. To prepare candidates to understand the laws and basic issues relevant to students placed in special education in the least restrictive environment, candidates are required to take SPED 120, Mainstreaming the Special Needs Child (3U), (or Psych 168) as a prerequisite to core school nurse courses. Candidates learn about the law that authorizes special education, federal Public Law 94-142 of 1975, now known as IDEA (the Individual with Disabilities Education Act). In NURS 184, Introduction to School Nursing, specialized healthcare needs of students, including those in special education programs are addressed: Care of students with chronic health problems, development of Individual Healthcare Plans and Emergency Action Plans (Wks 8 & 9); Special education, the IEP Process, interdisciplinary collaboration, role of the SEPA (Special Education Local Planning Area); IFSPs (Individual Family Service Plan), special programs/placement (Wks 13 & 14); medically fragile students, developing special healthcare plans, supervision and training unlicensed assistive personnel to assist in caring for students with special needs; infection control in the medically fragile population, understanding and advocating for parents of children with disabilities (Wk 15). In NURS 185, School Nurse Seminar, special education at the secondary level is addressed (Wk 1). Candidates also have an assignment that requires that they spend time shadowing three other members of the education team to gain insight into their roles and how they work with students and families, and how they interact as a member of the education team. In NURS 186, School Nurse Practicum I, candidates learn first-hand about the role of the school nurse as a member of the IEP team. Candidates gain insight into the IEP process through completing a required case study, on a school age child of a different cultural other than their own, who has been referred for evaluation for possible placement in a special education program. Candidates are expected to participate in the entire process beginning with the Developmental History, the school nurse assessment of the child, participation in the initial Student Study Team meeting, and ending with the placement of the student into the appropriate program. Candidates are also required to spend quality time in their practicum experience developing care plans for students with special needs and gaining first-hand experience in caring for the medically fragile. In practicum courses candidates are also encouraged to actually spend time observing in special education classrooms to gain insight into teacher-student interaction and classroom issues. In NURS 187, School Nurse Practicum II, candidates have the opportunity work with adolescent with special needs either through developing care plans, emergency action plans and/or

participating in the IEP process. At the secondary level, candidates also must use their counseling and assessment skills in meeting the healthcare needs of student who are suspected of substance addiction, have pregnancy related issues, and various other conditions of a physical or mental health nature, i.e. eating disorders, depression, such as eating have become addicted to substances.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E20, E27, E22, E24, E25, E27, E28, and S9, S10, S22, S23, S24, S27, S29 for candidate competency in addressing specialized healthcare needs of students, including special education students.

Understanding child and adolescent growth and development:

Candidates enter the program with a background of understanding for growth and development obtained from their basic undergraduate nursing programs. Candidates in core school nurse courses are expected to understand growth and development and, in practicum course (NURS 186 and NURS 187) expected to incorporate guidelines for growth and development when assessing client health status; and in planning and development age/grade level appropriate health education materials, lesson plans, and classroom teaching which needs to be based on student readiness to learn. Candidates also gain insight into the nutritional needs of children and adolescents based on age and level of activity. Sources used by candidates in the program that gives them the necessary insight into growth and development and nutritional needs for age and level of physical activity are the required course readings: Selekman (2006) *School Nursing: A Comprehensive Text*, chapter 16, Growth and Development: Preschool through Adolescence; California Department of Education (2003) *Health Framework for California Public Schools: Kindergarten through Grade Twelve*; California Department of Education (2010) *Health Education Content Standards for California Public Schools: Kindergarten through Grade Twelve*; and recommended text practicum courses, Lewis, K. D. & Bear, B. J (2008) *Manual of School Health* (3rd Ed.), as well as other reference materials. In seminar courses, growth and development is addressed in NURS 184, Introduction to School Nursing, assessment of growth and development and body mass index (Wk 6); and in NURS 185, School Nurse Seminar, adolescent growth and development (Wk 1).

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E2, E5, and S1, S3 for candidate competency in understanding child and adolescent growth and development as it relates to the health care and health education needs of school age children and adolescents.

Promoting staff wellness:

Candidates learn that “health promotion of staff” is one of the eight components of a Coordinated School Health Program and that the school nurse has a responsibility for promoting a healthy lifestyle among this population. Candidates understand that this means creating an interest among staff member for the purpose of encouraging them to take personal responsibility for their well-being through taking advantage of opportunities that the school nurse may provide such as health assessments, i.e. screening; health education offerings and fitness activities based on staff interest. Candidates learn that investment in the health of employees benefits both the employees and employers (Partnership for Prevention, 2001). Candidates learn that staff wellness results in improved health behavior and health status, reduced healthcare costs, and lower employee absenteeism as well as higher productivity and moral (Allegrante, 1998). It is also believed that attention to employee health in the school setting further leads to a greater commitment of the employee to the school’s health program and increases numbers of healthy role models for school age children and adults. In NURS 184, Introduction to School Nursing, health promotion of staff is addressed in the following: Coordinated school health programs (Wk 2); Cal-Osha guidelines and role of the school nurse in in-services school faculty/staff on safety measure related to blood borne pathogens, benefits of worksite health promotion program, school nurse development of surveys to determine health education and health promotion needs of students and staff, evaluation of survey data in determining programs (Wk 10). In NURS 185, School Nurse Seminar, health promotion of staff is addressed in the following: Coordinated school health programs at the secondary level (Wk 2); and bringing health fairs to campus (Wk 3). In practicum course (NURS 186 and NURS 187) candidates, under the supervision of a qualified school nurse preceptor, have opportunities to participate in health promotion among staff. This may include a screening program, i.e. taking blood pressures, administering PPD (TB) skin tests, presenting at a faculty meeting on current health concerns, i.e. HINI flu precautions, assisting in the development of a survey regarding staff interest in a health education offering or physical activity, or taking on a project such as a school health fair for students and staff.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E12, E13, and S11, S15 for candidate competency in promoting staff wellness.

Addressing issues of community and family violence:

In seminar courses candidates learn about the impact of violence on the school community and its effect of student learning; the early warning signs of danger and behavioral precursors; signs of gang activity and bullying; child abuse and neglect; gender harassment and abuse; date violence; and other various threats to campus security, i.e., intruders. Candidates also learn about school site safety plans that address prevention through partnering with law enforcement and other community groups and agencies, corporation among members of the school community,

school site security measures; conflict resolution; and the role of the school nurse. In NURS 184, Introduction to School Nursing, following are examples where subject matter is addressed: Identifying bullies and the victims, bullying prevention and the role of the school (Wk 7); Child abuse and neglect, identification and responsibility for reporting and role of the school nurse. In NURS 185, School Nurse Seminar, following are examples where subject matter is addressed: Bullying recognition and prevention at the secondary level, sexual harassment (Wk 10); safe schools and the role of the school nurse, disaster prevention, intervention, and post-vention, school wide emergency action plans, collaboration in keeping schools safe, gangs and violence, hate motivated behavior, racial and ethnic issue, anger management. In NURS 186 and NURS 187, practicum courses, candidates have the opportunity to experience first-hand the concerns associated with community and family violence.

Regarding community violence: Candidates spending time at school sites become aware of the potential dangers in the community and threats to schools. Working with a school nurse preceptor and other members of the education team, candidates begin to identify signs of gang activity and other potential threats to individuals and the school community. Candidates have the opportunity to see how schools and partners in the community work together in a multidisciplinary effort to carry out a school-wide safety plan. Most importantly, candidates learn that the school nurse is a key person in the school community, one who is knowledgeable of the physical and emotional needs of the students and who is known and trusted by parents and staff, that he/she is the only health professional at the school site and, therefore, needs to be involved in the planning, implementing, and in the execution of the disaster plan, particularly in the area of crisis response and as a first responder to the public health crisis.

With regard to family violence: In practicum courses (NURS 186 and NURS 187) working under the supervision of a qualified school nurse preceptor, candidates have the opportunity to use their assessment skills in identifying signs and symptoms of child abuse and neglect and to exercise their judgment in appropriate reporting. At the secondary level, candidates also have knowledge of the existence of date violence and sexual abuse reporting guidelines and are prepared, with preceptor supervision, to counsel and refer these victims to the appropriate community resources and file appropriate reports.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E8, E15, and S6, S16 for candidate competency in addressing issues related to community and/or family violence.

Addressing substance abuse:

Candidates learn about substance abuse in core school nurse course relevant to the secondary level (middle school and high school). Nursing 185, School Nurse Seminar (secondary level),

week 6 is devoted to the role of the school nurse as it relates to substance abuse prevention and intervention among pre-adolescents and adolescents. This includes various types of street drugs and addiction, alcohol abuse, smoking and other inhalants, ergogenic substances used by athletes, factors leading to substance abuse, assessment and recognition of substance abuse, health education programs, health promotion and prevention, cessation programs, and Ed code references to health promotion and education in the area of substance abuse. In practicum courses, particularly at the secondary level, candidates have the opportunity to assess, interview, counsel, and refer students who are suspected of substance abuse. Candidates also gain insight the role of the school nurse with regard to reporting responsibilities, i.e., school administrator and law enforcement involvement. In the secondary level practicum, candidates are expected to visit community agencies and programs that treat adolescent substance abuse.

See Sec. 3 (p. 401): NURS 187 Preceptor Syllabus checklist – S17 for candidate competency in addressing substance abuse in the pre-adolescent and adolescent population.

Addressing acute and chronic diseases or conditions within the student population:

The candidate's nursing background has prepared them with insight into various acute and chronic health conditions. Candidates are also expected to have a clear understanding for the Nursing Process (assessment, diagnosis, outcomes identification, planning, implementation, and evaluation) with regard to problem solving and meeting the healthcare needs of school age children and adolescent. Prior to entering core school nurse course, candidates are required to have a current First Aid certificate and to have taken NURS 136, Health Assessment (or its equivalent), which gives them the knowledge background and skills necessary to properly assess the various health complaints related to acute and chronic health condition that students present with on arriving in the school health office. In NURS 184, Introduction to School Nursing, examples of subject matter addressed: Assessment as it relates to secondary and tertiary prevention and intervention (Wk 4); keeping children with allergies safe in the school setting (Wk 5); acute complaints, i.e., "stomachache," chest pain, complaints of "not feeling well"; chronic health conditions, i.e., asthma, diabetes I, seizure conditions, Sickle Cell disease, Allergic Rhinitis, encoprisis, food allergies, Cystic Fibrosis, health issues resulting from obesity, attention deficit disorder, etc. (Wks 6 and 7). In NURS 185, School Nurse Seminar, examples of acute and chronic health conditions at the secondary level: Substance abuse issue, suspected sexually transmitted diseases, pregnancy related problems, anxiety and stress related self injury, eating disorders (Wks 6-9); and use of school based clinics (Wk 12). In practicum courses, under the supervision of a qualified school nurse preceptor, candidates have ample opportunity to assess students with acute and chronic health conditions who are seen in the health office, develop Individual Healthcare Plans on those with chronic health conditions, and Emergency Action Plans for those with conditions that could result in an emergency. Candidates can also use their counseling skills in helping these students, as well as the opportunity to teach and instruct

the student regarding their condition and about self care and personal responsibility. Candidates have the opportunity to case manage, i.e., assist families in obtaining appropriate care, and to partner with care providers in the community and agencies in meeting the healthcare needs of these students. Further, candidates strengthen their understanding for confidentiality as it relate to HIPAA and FERPA laws in sharing information on a need to know basis.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E2, E4, E 20 through E25, E27, E29, and S19, S20, S22 through S29 for candidate competency in addressing acute and chronic disease or conditions within the school population.

PROGRAM STANDARD 5

The Socio-Cultural Context of School Nursing

Criterion 1: The program provides candidates with the opportunities to further develop their understanding of the socio-cultural context in which school nurses work in the school setting.

Candidates learn that understanding a child's development and health issues must include understanding of the family and socio-cultural environment. Vygotsky (1934/1986) argued that a child's development cannot be understood by a study of the individual alone, but we must also examine the external social world in which that individual life has developed. He described learning as being embedded within social events and occurring as a child interacts with people, objects, and events in the environment. For this reason, it is imperative that candidates have a good understanding for the socio-cultural environment in which the school population the candidate serves interacts with in order to serve them more meaningfully. Community health coursework as a prerequisite is required for candidates entering the program: The majority of candidates entering the program having completed a BSN program that includes community he

alth coursework leading to a PHN. While field experience may have taken place in another area of the state/country in some cases, and may not always be relevant to the school population the candidate plans to serve, the understanding for community issues as a whole is invaluable to school nursing practice. Candidates entering the program having completed a bachelor's degree in another field are required to take community health coursework at the university level, with field experience taking place in their planned area of school nursing practice. Emphasis is placed on the need for candidates to know and understand the socio-cultural, socio-economic, health issues within the community and insight into relevant community resources (a PHN is not required). California State University, Fresno offers community health coursework through the RN to BSN program, NURS 141, Concepts in Community Health (3U), and NURS 141L, Practicum in Community Health Nursing (3U).

In NURS 184, Introduction to School Nursing (seminar) candidates are made aware of socio-cultural issues in the community and in the school population, examples are seen in the following weeks questions: Coordinated school health programs that meet the needs of the school population (Wk 2); Role of the school nurse in understanding for cultural competence, issues associated with children of migrant and refugee families (Wk 7); issues related to poverty and homelessness, children of dysfunctional families, transcultural differences (Wk 11); serving students in special education (Wk 13-15); meeting the needs of foster children in the system and the role of the school nurse (Wk 14). Candidates in NURS 184 are asked to choose one of two

assignments that relates specifically to understanding cultural differences: to read a book by Ann Fadiman (1997) *The Spirit Catches You and You Fall* (likely the best account of understanding breakdown of cultural difference ever written), or candidates may choose to do a cultural interview on a family new to the United States that is other than their own culture. Either assignment gives students excellent insight into issue related to cultural difference. Candidates are also expected to use cultural theories in written assignments and in practice, i.e., Leininger's Transcultural Nursing Model. In NURS 185, School Nurse Seminar, socio-cultural issues are covered in weekly questions in the following areas: Special education population in the secondary population (Wk 1); substance abuse issues in the adolescent population (Wk 6); Coordinated school health programs, adolescent and family involvement (Wk 2); teen pregnancy trends among the Hispanic populations or another ethnic group in your area (Wk 8); mental health issues that tend to affect specific populations (Wk 9 and 10); gang activity and violence, motivation to join gangs, hate motivated behavior, racial and ethnic issues and the role of the school nurse (Wk 11). In NURS 187, School Nurse Practicum II, (secondary), candidates are asked to answer a journal question that involves finding out the percentage of the student population that falls into specific ethnic groups and to link specific health issues and health problems found to be associated with each of these groups, comparing their findings with the general population. Candidates are also required to spend 8 to 10 hours each semester out in the community becoming acquainted with community resources and visiting community agencies and programs to gain insight into community health issues and how health needs are being met.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E18, E19 and S13, S24, S26, S27, S29 for candidate competency in understanding of the socio-cultural context in which school nurses work.

Criterion 2: As part of these opportunities, candidates experience the range of diversity represented within the local community including culture, ethnicity, language, age, gender, gender identity, students with special needs, socioeconomic status and value systems:

In didactic courses (NURS 184 and NURS 185) candidates learn about socio-cultural issues, socioeconomic issues facing families in the community, as well as issues relevant to students with special needs, gender issues, etc., the knowledge of which candidates bring with them into their practicum experiences. Candidates learn about and develop a keener awareness and sensitivity for cultural and ethnic difference which candidates can use in meeting the needs of children and families. Candidates gain insight into socioeconomic issues that may impact a child's ability to stay focused and learn, i.e., hunger, i.e. children who may be kept out of school to work in the fields to support the family; candidates learn about free or reduced school nutrition programs and qualifying factors., issues related to poverty, homelessness, concerns for migrant and refugee families and children; and about caring for students with special needs, issues related

to gender confusion and identity. Candidates in the program are reminded that the school nurse must reach outside of the building and become involved in the community in order to understand the socio-cultural, socioeconomic, and health related issues that affect the children they serve in their schools. As was previously mentioned, candidates coming into the program are required to take community health coursework as a prerequisite to entering the program which has given them an initial awareness of community public health issues.

Exposure to diversity represented in the community in practicum courses (NURS 186 and NURS 187). Candidates are required to take two (3U) practicum courses, a total of 270 hours. (Note: Fifteen hours each course is set aside for candidate participation in class discussion and conferences with clinical instructors.) In each practicum course, under the supervision of a qualified school nurse preceptor, candidates spend 120 hours interacting with students at school sites, families, community agencies and programs. Candidates who are employed as school nurses while in the program are given 40 hours credit towards their practicum experience since they are already actively engaged in working with students and families at their own school sites. In practicum courses, candidates have the opportunity to assist students in schools that reflect the surrounding community of which they are a part. Candidates interact with students of all ages from preschool to grade twelve, and young adults returning to school in continuing education programs. Candidates counsel, teach, and meet the healthcare needs of students of both genders, gain insight into gender identity issues, students in special education programs with a variety of learning disabilities and health needs. Candidates also grow to understand that different ethnic, cultural, and socioeconomic groups have values that may differ from their own and that the school population is a reflection of the surrounding community. Candidates are continually exposed to the diversity each day that they interaction with students, families, and staff within the school setting. As previously mentioned, candidates also spend 8 to 10 hours in each practicum out in the community becoming familiar with services and programs. Finally, candidates in NURS 186, School Nurse Practicum I, are expected to complete a case study on a school age child of a culture other than their own. In doing the case study, candidates are expected to make a home visit to gain first-hand insight into a family situation and becoming acquainted with practices, beliefs and values.

In practicum courses, candidates learn to recognize indicators of the socioeconomic condition of the general community that are reflected in the school population. For example, the percentage of students in school who qualify for the free or reduced breakfast and lunch programs, the percentage of students without health insurance coverage, those in need of dental care, children whose parents can't afford glasses, parents who come to the school nurse requesting sources of free food, shelter, and clothing, and the percentage of students in school who are English as a second language learners and whose parents need help to overcome language barriers to access community services. Candidates soon become aware that the role of the school nurse extends beyond meeting the immediate healthcare needs of student, to becoming a resource person who

must be knowledgeable about community resources to meet the health and basic survival needs of students and their families. The fact that candidates are required to have had community health coursework and must spend at 8-10 hours in each practicum course out in the community becoming familiar with resources gives the candidate insight into community issues.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E19 and S13, S24, S26, S27, S29 for candidate experience as it relates to understanding the range of diversity represented within the local community.

See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Syllabus, Evaluation of Student Professional Dispositions: Disposition 4, “Candidate demonstrates the dispositional tendency to value diversity – cultural, linguistic, cognitive, and physiological.” (This disposition is critical to differentiating instruction and creating psychologically and physically safe helping/learning environments.

Criterion 3: The program assists candidates to formulate strategies for identifying and appropriately addressing social and cultural community issues that affect school health and students’ abilities to learn:

Candidates learn that in order for children and adolescent put their full attention to optimal learning, students must see the school environment a harmonious place where there is understanding and acceptance for those from the various groups in the school community. This means that school staff, including the school nurse, must work to make that happen. In core school nurse courses, candidates learn that, in order to work effectively with children and families of diverse cultures, the candidates must understand the complex social, political, and economic forces that shape the lives of clients, so that the candidate can effectively promote health and well being within a school community. In NURS 184, Introduction to School Nursing, candidates learn about models and frameworks of cultural competency, i.e., Leininger (Wk 11). An assignment in this course, that further helps candidates understand the importance of working effectively with those of another culture, is a required book report on cultural differences or an arranged interview with a family of a culture other than the candidates own. Candidates learn that racial and ethnic groups may view health care and healthcare professionals from a perspective based on their previous experience and knowledge. They come to understand these different views and recognize that healthcare must be provided appropriately and respectfully. Candidates also come to recognize that they must examine their own personal cultural beliefs and identify potential prejudices or stereotypical triggers that may affect their ability to work affectively with a particular group or client. Candidates also learn to understand that cultural diversity is not only about racial and ethnic groups, it can be a particular group with a pattern of beliefs, values, and actions that can cause one to view them as a cultural group. In practicum courses (NURS 186 and NURS 187), candidates have the opportunity to put into practice what

they have learned about relating effectively with various social and cultural groups and individual students. Under the supervision of a qualified school nurse preceptor, candidates are also expected to partner with other members of the educational team in working to creating a harmonious and friendly atmosphere within the school community, i.e., participating in anti-bullying efforts, participating in campus activities that help the school community understand and appreciate the uniqueness of other cultures, demonstrating tolerance in school nursing practice, taking the time to learn about a particular culture or ethnic group before addressing a health need, working to break down communication barriers through being sure that written communications to families go home in their own language, use of interpreters in the case of limited or non-English speaking students and families; and advocating for families as needed.

See Sec. 3 (p. 396 and p. 401) NURS 186 and NURS 187 Preceptor Syllabus checklists – E18 and S13, S24, S26, S27, S29 for candidate ability to formulate strategies for identifying and appropriately addressing social and cultural community issues that affect school health and students’ ability to learn.

Criterion 4: The program assists candidates to adapt their approach in order to meet the needs of English learner students and their families:

In NURS 184, Introduction to School Nursing Practice, candidates learn about the need for cultural sensitivity, referring to an attitude towards a culture or ethnic background different from one’s own, and cultural competence, the process of understanding and respecting the cultural values and practices of clients. An assignment choice in NURS 184, to read and report on a book by Anne Fadiman (1996) *The Spirit Catches You and You Fall Down*, or to report on an arranged interview with a family member from another culture other than the candidate’s own. Either of these assignments helps to prepare candidates to understand the importance of cultural sensitivity and cultural competence. Before meeting with a client or family from a cultural or ethnic group other than the candidate’s own, candidates are expected to prepare for that meeting through reviewing literature relevant to that particular client’s culture, i.e. customs, beliefs, habits, etc. Candidates are also expected to make arrangements with an appropriate interpreter who will accompany the candidate on a home visit, or be present during an office visit, to break down the communication barriers and bring understanding to both parties. Candidates are expected to demonstrate cultural competence throughout their interaction with a client or group from another culture, i.e., through an awareness of one’s own values and attitudes so as not to influence one’s attitudes toward others; through demonstrating awareness of the client’s culture, health-related needs, and understanding of health and illness; and through demonstrating the ability to adapt care to be congruent with the client’s culture. Candidates also learn the importance of being sure that information sent home to parents can be understood, i.e., written notices to parents in their own language, simplifying/adapting lessons for English learners and/or enlisting the help of the

classroom teacher in interpreting and explaining, and posting notices in the health office in other languages, etc.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E18 S24, S27 for candidate ability to adapt their approach in order to meet the needs of English learner students and their families.

See Sec. 3 (p. 407) NURS 186 and NURS 187 Preceptor Syllabus checklist, Evaluation of Student Professional Dispositions. Disposition 4, “Candidate demonstrates the dispositional tendency to value diversity – cultural, linguistic, cognitive, and physiological.” (This disposition is critical to differentiating instruction and creating psychologically and physically safe helping/learning environments.)

PROGRAM STANDARD 6

Legal and Ethical Aspects of School Nursing Practice

Criterion 1: The program assists candidates in understanding the scope and practice of school nursing as regulated by the California Board of Registered Nursing, applicable sections of the Education Code, and other relevant local, state, and federal codes and regulations.

Before candidates can function competently as a school nurse, they must have a clear understanding for the legal guidelines of school nursing practice. The program enables candidates to identify, delineate, and clarify their role as a professional school nurse through understanding the legal school nurse guidelines. Throughout the 12 units of core school nurse coursework in the program, beginning with NURS 184, Introduction to School Nursing Practice, candidates are exposed to legal guidelines of school nursing practice and must refer to them frequently in responding to weekly questions, other written assignments, and to follow those legal guidelines in their field experiences. Following are legal guidelines that candidates are expected to follow: The National Association of School Nurses (2005) *School Nurses: Scope and Standards of Practice* which includes the Standards of School Nursing Practice and Standards of Professional Performance, which are based on the American Nurses Association standards. Candidates are registered nurses in the state of California, and as such are obligated to abide by the *California Nurse Practice Act* (Business and Professional Code, sections 2725-2742). Candidates are expected to have insight into and abide by the *California Education Code*, more specifically the sections of the code that relate to the role of the school nurse in California schools, state screening mandates, health promotion and health education guidelines, rights of students and confidentiality issues, medication at school, school safety, parent rights, required immunization for school entry, and other sections of the code that relate to health matters. Candidates are also expected to be knowledgeable of other state codes that relate to school health, i.e. the *California Code of Regulations*, the *Health and Safety Code*, and laws, i.e., child abuse reporting. Candidates understand that the school nurse must adhere to their school district policies which are based on the California Education Code. Candidates learn about federal laws that affect schools and school nursing practice, for example, the *No Child Left Behind Act of 2001*; the *Individuals with Disabilities Education Act (IDEA)*; the *Family Educational Rights and Privacy Act (FERPA)*; and the *Health Insurance Portability and Accountability Act (HIPAA)* etc. Upon entering NURS 184, candidates are made aware of the value of membership in CSNO (California School Nurses Organization) and NASN (National Association of School Nurses) and the CSNO and NASN *Position Statements* established by each of these organizations that guide and to strengthen school nursing practice. In Practicum courses, NURS 186 and NURS 187, Candidates are expected to demonstrate their ability to apply legal guidelines in their school nursing practice. This is observed and verified by a qualified school nurse preceptor.

NURS 184, Introduction to School Nursing, the following weeks address legal aspects: Week 1, *Nurse Practice Act* and the role of the School Board of Education; week 2, coordinated school health programs, state and federal role and framework of school nurse practice; week 3, legal framework, liability issues, CSNO/NASN position statements; confidentiality, HIPAA/FERPA, duties of a health clerk. CA Ed. Code and district policies; week 4, week 5, state screening programs and Ed Codes that apply, BRN and delegation of administration of medications; week 6, Migrant Program, migratory children, legal record keeping; week 8, legal guidelines for communicable disease control; week 9, care of acute and chronic health conditions – school nurse legal role; week 10, health promotion and the Ed Code; week 11, individuals with disabilities (IDEA); week 12, Office of Civil Rights; week 13-14, legal basis for special education programs. An assignment in NURS 184 requires candidates to write a ***School Board Paper*** after attending a meeting. For the paper, students must research the election process for board member, to legal purpose of that body, and the role the board plays in approving district policies, including those developed for health services to pupils.

NURS 185 (School Nurse Seminar), the following weeks address legal aspects: Week 1, health framework; week 2, coordinated school health programs; week 3, standards of school nursing practice; week 4, health education and the Ed Code; week 5, Driver's Ed, health insurance and codes; week 6, tobacco education and Ed Code; HIV/AIDS, sex education and Ed Code; week 8, programs for pregnant teens and Ed Code; week 9, attendance and district policy; week 10, sexual harassment; week 11, Crisis Management Response; week 12, politics 101; week 13, Healthy Start, grants; week 14, pursuing justice in the courts, minor consent, suspension/expulsion and sections of the Education Code that apply; week 15, Medi-Cal billing, reviewing the standards of practice. An assignment in NURS 185 requires student to write a *Legislative Paper*. To write this paper, candidates must research a bill, relevant to school health and/or school nursing, that is currently evolving through the legislative process, form an opinion of the bill based on the best interest of children's health/families/nursing and contact (letter or office visit) a legislator/senator/governor and state their position on the bill and why. This assignment gives students excellent insight into the legislative process and importance of political involvement on the part of the school nurse.

NURS 186 and NURS 187 (elementary and secondary practicum courses respectively) – students are expected to review appropriate sections of the Education Code that relate to their school nursing practice, as well as district policies, other health related state and federal laws, standards of school nursing practice, and the *Nurse Practice Act* before providing services to children and families, developing curriculum/lesson plans, carrying out state mandated screening, sharing confidential information with others, training and supervising unlicensed assistive personnel. In completing a *Cross-Cultural Special Ed Case Study* in NURS 186, candidates must be aware that steps involved in the process of evaluating a child or adolescent for considered placement in a special program is a legal process (Individual Education Plan) and that guidelines must be

followed meticulously. In completing assignments in NURS 187, candidates must again consult the Education Code and district policy before creating new health curriculum at the secondary level (*Health Education Curriculum Proposal*) or before proceeding with facilitating a small group regarding health issues (*Aggregate Teaching/Small Group Activity*).

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E33 and S34 for candidate competence in understanding of local, state and federal laws and regulations applicable to practice of school nursing.

Criterion 2: The program assists candidates to understand the practice of school nursing within a public educational system, including the structure and authority of school district administration:

In NURS 184, Introduction to school Nursing: Candidates learn that their position in a school district is established through the California Education Code, in section 49426, which describes who shall practice school nursing in the state of California and the role of the school nurse. Candidates also learn about the role of the California Commission on Teacher Credentialing with regard to the established guidelines for university credential programs that allows for universities to offer coursework to candidates. Other facts that candidates are made aware of: The existence of a State Nurse Consultant who is hired by the California Department of Education and who is available to school nurses for consultation; that school nursing in California is not mandated and that school districts may choose not to hire a school nurse (though it is in their best interest to do so); that there is no set school nurse/student ratio, so the number of students that school nurses may serve fluctuates greatly from district to district; and that school nurses in California, for the most part, are hired by school districts. One of the assignments in NURS 184 asks candidates to write a *School Board Paper* after attending a board meeting (an eye opening experience for candidates). In the assignment, candidates are asked to describe the role and responsibility of the Board of Education, how board members are elected, who is responsible to whom, as well to describe the proceeding and events of the meeting. Candidates are also asked to gain insight into the organizational structure of the school district in which he/she is employed, or in school district in their area, for the purpose of helping the candidate understanding the chain of authority. A weekly question in NURS 184 (Wk 1) asks candidates to describe the dynamics of the school community and district organization in which the school nurse works. This is also an eye opening assignment for candidates as chain of authority can be confusing when it comes to whom the school nurse should report, i.e., a building principal, superintendent, or director of health services who may be a psychologist. This subject matter is also discussed during class time in practicum courses.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor checklists – E37 and S32 for candidate competence in understanding the public education system, including the structure and authority of school district administration.

Criterion 3: The program helps candidates understand how to apply decision making skills in an ethical manner within situations unique to the school setting:

In Nursing 184 (Introduction to School Nursing), in the beginning of semester, students are asked to develop their own *Philosophy of School Nursing*. The assignment involves researching standards of nursing practice, theoretical concepts, moral/ethical responsibilities, personal values and beliefs, and perception of the school nurse role. After review by the course instructor, students are to place their Philosophy of School Nursing in their Personal Reference Manual (which they are encouraged to keep for their own nursing practice reference) as a first entry document. On completing N185 (School Nurse Seminar), students are invited to review their philosophy to determine if it has changed over the year. This assignment gives students an opportunity to reflect on depth of understanding, changes in attitude or values with regard to their school nursing practice. Further, in NURS 184, ethical and moral issues, as well as ethical theories, are specifically addressed in Week 14, in the form of weekly questions that candidates can choose to research and write up. These questions relate to: Human and ethical values, ethical concepts, ethical quandary, problems and examples. Questions also ask candidates to discuss different types of ethical theories, and fundamental ethical principles that should guide all nursing practice. In NURS 185, School Nurse Seminar (secondary), candidates are introduced to the many health issues and health problems confronting adolescents which requires the candidate to understand how to apply decision making skills in an ethical manner. In these cases it is important for the candidate to have insight into sections of the California Education Code with regard to legal and confidentiality issues, student rights, parent rights, i.e.

In practicum courses, students can be frequently faced with ethical, moral, legal issues that require consulting with the candidate's school nurse preceptor, as well as looking within themselves to evaluate their own attitudes, values, and ethical and legal responsibilities toward the pupils, families, and the safety of community and others. Student in both practicum courses, spend 12 hours each semester in online discussion with classmates sharing experiences, strategies, and responding to one another on issues related to decision making in clinical practice. Ethical and legal issues are some of those topics candidates enjoy discussing most and learn a great deal from one another, as well as from input from clinical instructors. In NURS 186, School Nurse Practicum I (elementary), ethical decision making could relate to a DNAR (Do not attempt to resuscitate) order on a medically fragile child. It could relate to a confidentiality issue, such as sharing information between parties. In Module IV, there is a specific journal question that relates to ethical and moral decision-making. Students are asked to pick a current issue

relative to Special Ed nursing and discuss legal/ethical ramifications and concerns related to a medically fragile child in their caseload. Students are to refer to school district policy, the Ed Code, and the Nurse Practice Act in responding to the questions. In NURS 187, School Nurse Practicum II, there are many opportunities for candidates to be confronted with decision making related to adolescent health issues, especially confidential issues. There is a specific journal questions in Module II that relate to ethical decision-making and legal responsibility in which candidates are asked to review the legal rights of teens and their parents regarding confidentiality in matters of birth control, pregnancy, abortion, as well as general counseling guidelines and reporting related to mental problems and potential suicide; and to discuss the school nurse's ethical/legal responsibilities in these areas.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E31 and S31 for candidate competence in understanding how to apply decision making skills in an ethical manner within situations unique to the school setting.

See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Syllabus, Evaluation of Student Professional Dispositions: Disposition 3, “Candidate demonstrates the ability to make ethical judgments.”

Criterion 4: The program encourages candidates to continue to grow and develop as professionals within the area of school nursing:

National Association of School Nurses (2005) School Nursing: Scope & Standards of Practice, Standard 8, sums up the aim of faculty for candidates in the program. Candidates are strongly encouraged to participate in ongoing educational activities related to appropriate knowledge bases and professional issues, other than program offering, while they are still in the program. In practicum courses (NURS 186 and NURS 187) candidates may use 10-12 hours in each of the practicum courses to attend local school nurse workshops, conferences, and meetings where an in-service is taking place. During program orientation day for candidates entering core school nurse courses, a representative from CSNO (California School Nurses Organization) is invited to speak to candidates about the advantages of membership in their school nurse organizations. Candidates are encouraged to join their professional organizations to take advantage of the networking, educational offerings and excellent publications, such as the NASN (National Association of School Nurses) *Journal of School Nursing* which includes research articles that candidates can use in outcome based school nursing practice. It is also pointed out to candidates that getting involved in their professional organizations, either as board members or committee members, will keep them on the cutting edge of what is happening in school nursing and increase their professional satisfaction through making a difference for the profession and for the children they serve. In NURS 185, School Nurse Seminar, candidates in the program are encouraged to respond to a survey which requires self reflection and identifying personal strengths and

weaknesses with regard to levels of competence in various areas of school nursing practice. Candidates in both seminar courses are encouraged to use current research findings and sources of other evidence in responding to weekly questions and, in their practicum courses, to broaden their insight into caring for clients, as well as increase their knowledge of professional issues. As a leadership activity in a practicum course, candidates are also encouraged to attend a CSNO section board meeting and to report back to classmates.

See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Syllabus, Evaluation of Student Professional Dispositions: Disposition 1, Candidate demonstrates the ability to reflect Disposition 6, “Candidate demonstrates their enthusiasm for life-long learning.”

PROGRAM STANDARD 7

Preparation for Health Management Responsibilities within the School Setting

The program helps candidates understand the school nurse's role in providing health leadership and management, health education, health research, direct client care, training and supervision of other personnel as applicable, and planning and coordination of healthcare services and programs.

Criterion 1: The Candidate understands the health leadership role in school nursing practice:

Candidates are introduced to the Standards of Professional Performance in NURS 184, Introduction to School Nursing (seminar). These are clearly addressed by Susan Proctor in the required program text by Janice Selekman (2005) *School Nursing: A Comprehensive Text*, and in the publication by the National Association of School Nurses (2005) *School Nursing: Scope and Standards of Practice*. Standard 15 specifically relates to the leadership role of the school nurse. Five key measurement criteria in this standard will be used as a guide in providing examples of how leadership is addressed in the program: (1) Measurement criteria, "Engages in teamwork as a team player and a team builder:" In the two seminar courses, candidates are asked to work with a partner in the development of an online Blackboard presentation for classmates requiring teamwork. A key assignment in NURS 186, School Nurse Practicum I, asks candidates to complete a case study on a school age child that requires collaboration, communication, and working together with other members of the education team. In NURS 185, School Nurse Seminar, candidates are expected to complete an assignment that asks the candidate interview and shadow three other professional members of the education team to gain insight into their roles and how the school nurse interacts with these members. (2) Measurement criteria, "Displays the ability to define a clear vision, the associated goals, and a plan to implement and measure progress." In both practicum courses, candidates are asked to write their own Student Goals and Learning Objectives in the beginning of the semester which they need to plan and achieve during the semester, and which must include a means by which the goals can be measured. In both practicum experiences, candidates also demonstrate their ability to use the nursing process in developing care plans for clients with chronic health problems and those with handicapping conditions which require teamwork in working with others. (3) Measurement criteria, "Teaches others to succeed by mentoring and other strategies:" Candidates demonstrate leadership through instruction, health promotion, and teaching of children, adolescents, families, and staff to strive for a healthier lifestyle and wellness. (4) Measurement criteria, "Directs the

coordination of care across settings and among caregivers.” With preceptor supervision, candidates are expected to demonstrate their ability to train and supervise unlicensed assistive personnel (UAPs) in carrying out tasks, assisting with medications and/or in providing special health care procedures. Candidates often choose to train UAPS as a special project for which they must submit a proposal and a plan for carrying out the training to their preceptor and clinical instructor for approval. (5) Measurement criteria, “Serves in key roles in the school and work settings by participating on committees, councils, and administrative teams.” In both practicum experiences, candidates are encouraged to take on leadership roles, i.e., presenting on the role of the school nurse or health issues at a faculty meeting or a school board meeting; participation in the planning and in coordinating a school health program, or involvement in planning a school wide disaster preparedness activity; reviewing health policies and initiating changes as appropriate. Candidates are encouraged to discuss their interest in leadership activities with their preceptor and clinical instructor. Extra time is granted for meaningful leadership roles beyond the usual school nurse activities.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E31 and S31 for candidate understanding of the health leadership role in school nursing practice.

Criterion 2: The Candidate understands the health management role in school nursing practice:

The various roles of the school nurse manager are covered extensively in NURS 184, Introduction to School Nursing (seminar). The role is clarified readings in both the text by Janice Selekmán (2005) *School Nursing: A Comprehensive Text*, and in the publication by the National Association of School Nurses (2005) *School Nursing: Scope and Standards of Practice*. Standard 16, in *School Nursing: Scope and Standards of Practice*. Following are examples of subject matter covered in NURS 184: An initial assignment asking candidates to write their own philosophy of school nursing; role of the school nurse in coordinated school health programs (Wk 2); Standards of Performance, the Ed Code, other state and federal laws, elements of a lawsuit, professional organization position statements that guide practice, district policies (Wk 3); school health models, conceptual framework, program management, concepts of administration, management and leadership, conflict management, employee satisfaction (Wk 4); managing various health service programs (Wk 5); outcome identification in practice, school based clinics, California Code of Regulations (Wk 6); community collaboration, School Health Index, ethical decision making (Wk 7); managing healthcare issues, decision making (Wk 8-9); collaboration, the IEP process, children with special needs, school nurse as team player (Wks 10-15). In NURS 185, School Nurse Seminar, the role of the school nurse as manager relates to the secondary population: Coordinated school health programs, empowerment in school nursing, functions and management of the health office (Wk 2); administrative services, funding sources,

meeting the needs of the uninsured, health promotion and health fairs (Wk 3); evidence based practice, making a school board presentation (Wk 4); managing adolescent health issues of all types (Wks 5-10); school safety issues and disaster preparedness (Wk 11); school based clinics, collaboration and partnerships, school nurse responsibility related to political issues and legislation, school nurse competence and performance evaluation (Wk 12); school nurse role in research (Wk 13); legal and ethical issues, resource mapping (Wk 14); staff recruitment, quality assurance, and professional commitment, revisiting personal philosophy of school nursing (Wk 15).

In practicum experiences (NURS 186 and NURS 187): Several key measurement criteria in this standard will be used to demonstrate how candidates gain insight into and participate in program management in their practicum experiences under the watchful eye of a qualified school nurse preceptor: (1) Measurement criteria, “Manages school health services as appropriate to the nurse’s education, position, and practice environment.” In both practicum experiences, candidates have the opportunity to grow in their understanding of the role of the school nurse as manager of health services through observing a qualified school nurse preceptor who also gives the candidate the opportunity to demonstrate their ability to fulfill the role of school nurse manager under supervision. (2) Measurement criteria, “Conducts school health needs assessment to identify current health problems and identify the need for new programs.” Candidates have teaching assignments in both practicum experiences that require the candidate do a needs assessment or conducting a survey to determine need educational needs of students. Through working with a preceptor, candidates also understand that a needs assessment must be done whenever new program development or health services are being considered. (3) Measurement criteria, “Develops and implements health policies and procedures in collaboration with the school administration, the board of health, and the board of education.” A journal question in NURS 186 asks candidates to review school health policies and to identify outdated policies or lack of policies. Candidates are then asked to outline the steps that must take place to make changes or create a health services policy and procedure in order to bring it before the board of education. Under the supervision of their preceptor, candidates may opt to work on making a policy/procedure change as a student goal or may select it as a special project for which they need to submit a proposal for approval to their preceptor and clinical instructor. (4) Measurement criteria, “Demonstrates knowledge of existing school health programs and current health trends that may affect client care, the sources of funding for each, school policy related to each, and local, state, and federal laws governing each.” Working with a qualified school nurse preceptor, candidates learn first-hand about existing school health programs and trends that may affect client care. In NURS 186, School Nurse Practicum I, a journal question asks candidates to find out about district funding sources and the amount of funds out of the General Fund that is allotted for health services for supplies, personnel, and programs. They also learn about other sources of funding, i.e., grants. In NURS 187, School Nurse Practicum II, a journal question asks candidates to find out about the different types of billing for health services, i.e. Medi-Cal.

Before candidates proceed with providing health services or teach, they are expected to review related sections of the CA Education Code and other state and federal laws before proceeding. This is also the case with completing written assignments. (5) Measurement criteria, “Adopts and uses available technology appropriate to the work setting.” In their clinical experiences, candidates are expected to understand the use of current technology and use it in their practicum experiences under the direction of their preceptor, i.e., computer software program use - logging students into the health office, recording screening results, and contributing to reports; and use of the other forms of communication with insight into confidential issues related to technology use.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E31 through E40 and S31 through S40 for candidate understanding for the health management role in school nursing practice.

See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Syllabus, Evaluation of Student Professional Dispositions:

Disposition 2, “Candidate demonstrates critical thinking skills.”

Disposition 3, “Candidate demonstrates the ability to make ethical judgments.”

Disposition 5, “Candidate demonstrates a collaborative disposition.”

Disposition 6, “Candidate demonstrates enthusiasm for life-long learning.”

Criterion 3: The Candidate understands the role of the school nurse with regard to health education:

The role of the school nurse as a health educator is specifically addressed in NURS 184, Introduction to School Nursing, in Week 10. Following are examples of subject matter: Health education a component of the comprehensive school health program, conceptual model for health teaching, state and national standards for health education, developing a health education program, family and community involvement in health education, health promotion for faculty and staff. In NURS 185, the role of the school nurse in health promotion and health educator is addressed in weeks 2-10 as it relates to students with special needs and a variety of adolescent health issues. The guidelines for candidates as school nurse health educators is based on the National Association of School Nurses (2005) *School Nursing: Scope & Standards of Practice*, Standard 5B; and “The School Nurse’s Role as a Health Educator” authored by Susan G. Praeger and is included in Janice Sekeman’s (2005) *School Nursing: A Comprehensive Text*. In practicum courses, at the elementary and secondary levels, candidates have ample opportunity to obtain health teaching experience under the supervision of a qualified school nurse preceptor. Several key measurement criteria in Standard 5B will be used as a guide in providing examples of how candidates gain understanding for health teaching in practicum courses: (1) Measurement criteria, “Provides general health education to the student body at large through direct classroom instruction or expert consultation.” In NURS 186, candidates are asked to teach a health lesson in

a classroom of elementary school age children for which they must identify a need, research the subject matter, develop a teaching outline, and teach a health lesson based on grade appropriate subject matter. In NURS 187 (secondary), candidates are asked to choose between facilitating discussions on a health issue(s) with a select small group of students or work with a teacher to incorporate curriculum into a health module that has not been previously covered, the candidate must also teach the health lesson. (2) Measurement criteria, “Uses health promotion and health teaching methods appropriate to the situation and the client’s developmental level, learning readiness, ability to learn, language preference, and culture.” Candidates must base health lessons on grade appropriate learner readiness guidelines in the California Department of Education (CDE) (2003) *Health Framework for California Public Schools: Grades Kindergarten through Grade Twelve*, and the CDE (2010) *Health Education Standards*, as well as modify lessons accommodate cultural differences and other students with special needs. (3) Measurement criteria, “Seeks opportunities for feedback and evaluation of the effectiveness of the strategies used.” As part of health teaching assignments, candidates are expected to develop pre-post assessment tools in order to evaluate learning outcomes. Preceptors are expected to be present during lessons taught to offer feedback, as well as the classroom teacher. Candidates are also to critique their own teaching effectiveness and areas for needed improvement in the future. (4) Measurement criteria, “School nurse participates in the assessment of needs for health education and health instruction for the school community.” Candidates are expected to carry out a needs assessment before deciding on subject matter to teach in the classroom. (5) Measurement criteria, “Participates in the evaluation of health curricula and health instructional materials and activities.” In NURS 187, School Nurse Practicum II, candidates are asked to review and evaluate the secondary health curriculum at a school site to determine if it is substantial and/or relevant. In completing the assignment, Health Ed. Curriculum & Teaching, related to incorporating new curriculum into to an existing health module, candidates must determine its need through reviewing existing materials.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E5, E12, E13, E14, and S3, S11, S13, S24 for candidate understanding of the role of the school nurse as a health educator.

Criterion 4: The Candidate understands the role of school nurse with regard to research and its importance:

A course in statistics and nursing research are required prerequisites for entering the program. Candidates in this post baccalaureate credential program are not asked to complete a research project though they are required to understand the importance of research as a basis for school nursing practice, the different types of research projects, and how to plan and carry out a research project at a school site. In the course of answering weekly questions in seminar courses,

candidates must read relevant research articles. Candidates must also research a topic with a partner which they will share as a online Blackboard presentation for classmates in each of the seminars. In NURS 185, candidates have a choice of researching an adolescent mental health condition and writing a paper, or reading a book that relates specifically to an adolescent mental health issue(s) and writing a report. Week 10 questions and discussion in this class are devoted to research, i.e. the benefits of research in school nursing practice, applying research in practice, role of the school nurse in a research project, grant writing, and publishing articles and research findings. Several key measurement criteria from NASN (2005) *School Nursing: Scope & Standards of Practice*, Standards of Professional Performance, Standard 13, will be used as a basis for providing examples of how candidates gain understanding and use research in practicum experiences: (1) Measurement criteria, “Utilizes the best available evidence, including research findings, to guide practice decisions.” In practicum courses, candidates are expected to take the time to review research related to specific diagnoses and situations that they encounter. (2) Measurement criteria, “Identifies clinical problems specific to nursing research (client care and nursing practice).” In practicum courses, candidates are encouraged to look for problem areas that could lead a potential research project, and to discuss these with their preceptor or consider a project for themselves in their own school nursing practice. (3) Measurement criteria, “Participates in data collection (surveys, pilot projects, formal studies).” In practicum class discussions, the value of data gathering and surveys are discussed in light of determining nursing care outcomes that keep kids in school learning and validate what school nurses do. (4) Measurement criteria, “Critically analyzing and interpreting research for application to practice” In each practicum course candidates are required to critique a research article relevant to that particular educational level with application the findings to their own school nursing.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E34 and S33 for candidate understanding of the role of the school nurse in research and its importance to school nursing practice.

Criterion 5: The Candidate understands the role of school nurse with regard to direct client care:

Opportunity to gain understanding for the role of the school nurse as it relates to direct client care is covered in seminar courses and candidates have the opportunity to incorporate this understanding into direct client care in their practicum experiences. Students with acute and chronic health conditions, those with potential health problems, those requiring emergency first aid, and those being worked up for a 504 or IEP (Individual Healthcare Program), all require hands-on assessment and/or direct client care. Following are some examples of how direct client care is addressed in NURS 184, Introduction of School Nursing (seminar): Primary, secondary, tertiary intervention in school nurse practice (Wk 4); preschool assessment, medication

administration in school, training unlicensed assistive personnel to provide direct client care; (Wk 5); case finding through screening programs (Wk 6); reviewing physical assessment skills (Wk 7); role of the school nurse in managing students with acute and chronic health conditions (Wk 8); individual healthcare plans and emergency action plans (Wk 9); the role of the school nurse in care of students with mental health issues, anxiety disorders, and behavioral issues (Wk 11); IDEA and 504 plans, role of the school nurse in assessing students with disabilities (Wk 12); and direct care of the medically fragile (Wk 15). In NURS 185, School Nurse Seminar, examples where direct care include: Assessment and first aid for sports injuries (Wk 5); assessing, counseling, and referring students with potential health issues related to substance abuse, communicable disease, and teen pregnancy (Wks 6-8); adolescents with mental health disorders and behavioral issues, i.e., eating disorders, self punitive behavior, etc. (Wks 9-10). In practicum courses, see *Preceptor Syllabus*, “Suggested Guidelines for Time Spent in Clinical Practice” (p.22). Guidelines specific to direct client care in the chart include time spent as follows: Students visiting the health office, screening and case finding, administration of medications and carrying out special physical healthcare procedures, managing clients with chronic health conditions and care plans, health assessment and work-ups related to the IEP process and 504 plans. The time that candidates spend with their school nurse preceptor providing hands-on direct client care depends on whether or not the candidate is currently employed as a school nurse. Candidates who are not currently practicing school nursing, must spend 120 hours of their practice experience each semester under the direct supervision of a qualified school nurse preceptor, it is recommended that 45 to 54 of those hours be spent in hands-on client assessment or direct care. For candidates who are already employed as a school nurse, it is recommended that they spend between 27 and 32 of their practicum hours each semester with a qualified school nurse preceptor in hands-on client assessment or direct care activities away from their work site.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E1, E2, E7, E20 - E27, E29 and S1, S10, S15, S20 through S24, S26 - S29 for candidate understanding of the role of the school nurse with regard to direct client care.

Criterion 6: The client understands the role of the school nurse in training and supervision of other personnel as applicable:

Candidates gave the opportunity to begin working with a qualified school nurse preceptor in NURS 186, School Nurse Practicum I, early in the fall semester when there is a need to orient and train UAPs (unlicensed assistive personnel) for the purpose of assisting school age children with taking medications, providing first aid, and providing permissible specialized physical healthcare to those students with special needs. Training and supervision UAPs is also a hot topic for NURS 186 class discussion on Blackboard. This is re-emphasized in NURS 184, Introduction to school nursing (Wks 5 and 15) with regard to first aid, office tasks, medication at school and caring of medically fragile student is covered. Reading for candidates that address training of

UAPs are: CSNO (California School Nurses Organization) (2009-2010) “*The Green Book: Guidelines and Procedures for Meeting the Specialized Physical Health Care Needs of Pupils*” manual, and the course text edited by J. Selekman (2005) *School Nursing: A Comprehensive Text*, chapter 46 (Staff Management) written by J. Hootman. Through readings, class discussion, and practicum experience with a qualified school nurse preceptor, candidates learn that, while school administrators have responsibility for student safety they cannot legally decide the level of special healthcare needed by a client, this is the responsibility rests with the credentialed school nurse. Candidates are expected to have a clear understanding of the *Nurse Practice Act* regarding medication administration and physical healthcare procedures that can and cannot be carried out by UAPS. Candidates are also responsible for having understanding for sections of the CA Education Code that apply, as well as possible conflicts in the law. The fact is stressed that school nurses are first registered nurses in California and therefore must abide at all times with the *Nurse Practice Act*. Working with a qualified school nurse preceptor, candidates have the opportunity to participate in training and monitoring UAPs and learn important details about retraining guidelines, documentation, and what to do in the event that a UAP is not capable of following directions or qualified to carry out a procedure. Candidates interested in taking on a special project in a practicum frequently choose to develop a presentation for training UAPs.

See Sec. 3 (p. 395 and p. 400): NURS 186 and NURS 187 Preceptor Syllabus checklists – E7 and S5 for candidate understanding of the school nurse role in supervising and training other personnel as applicable.

Criterion 7: The candidate understands the role of the school nurse in planning and coordination of healthcare services and program:

Candidates are introduced to role of the school nurse in planning and coordinating school health programs and other types of program early on in core school nurse courses. For example, in NURS 184, Introduction to School Nursing (seminar), candidates are asked to discuss the eight components of a comprehensive school health program, the role of the school nurse in participating in the development of a coordinated school health program, and government role in programs (Wk 2); the role of the school nurse in disease prevention thorough involvement state immunization programs and Child Health & Disability Prevention programs (Wk 5); the role of the school nurse in planning and conducting state mandated screening programs and other screening programs; the use of the School Health Index to determine school wide program needs (Wks 6,7, 8); understanding health education as a component of a the coordinated school health system, and the need to involve family and community in programs (Wk 10). Examples of what candidates learn in NURS 185, School Nurse Seminar, at the secondary level: Coordinated school health programs and community involvement (Wk 2); adolescent preventive services,

health promotion and disease prevention through coordinated programs (Wk 3); comprehensive health education models, family life education for special learners (Wk 4); role of the school nurse in promoting adolescent fitness, substance abuse prevention and cessation programs, and programs for pregnant and parenting teens (Wks 5, 6, 8); role of the school nurse in school based clinics and community partnerships (Wk 10). In practicum courses (NURS 186 and NURS 187), candidates, working with a qualified school nurse preceptor, have the opportunity to gain a global understanding for planning and coordination of healthcare services and programs for students in grades preschool through grade twelve. Candidates spend quality time assisting their preceptor planning and conducting mandated screening programs and other screening programs, i.e., dental screening and oral hygiene education; body mass index, height & weight (indicators of deviation from the norm); and Acanthosis Nigricans (early indicator of diabetes II); etc. Candidates also gain insight into health education programs related to wellness for students and staff, i.e., nutrition and fitness, communicable disease prevention, Family Life Education, HIV/AIDS awareness, substance abuse prevention/cessation programs, bullying prevention, school safety, etc.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E32 and S36 for candidate understanding of the role of the school nurse in planning and coordination of healthcare services and programs.

Criterion 8: The program helps candidates understand and demonstrate a collaborative approach to providing and/or facilitating health-related activities, including acting as a member of a team addressing student achievement:

Collaboration addressed in NURS 184, Introduction to School Nursing (seminar): Evidence of the importance of collaboration is addressed in didactic coursework in weekly questions throughout the semester. Examples of this are: School nurse collaborates with other school professionals in establishing and maintaining coordinated school health programs; the school nurse collaborates and works with the health clerk to maintain a well organized health office and provide appropriate health care to pupils (Wk 3); school nurse as manager of health care programs and leader who collaborates with other disciplines (Wk 4); the school nurse works with other professionals in community health programs to provide services to children and families (Wk 5); the school nurse works with other school site personnel in organizing screening programs at school sites (Wk 6); the school nurse collaborates with other health care providers and teachers to meet the needs of students with chronic health conditions (Wk 7); the school nurse works with other school professionals and school site personnel in developing procedures to deal with injuries and acute illness (Wk 8); the school nurse works with other school professionals and parents to develop Individual Health Care Plans for students with acute and chronic health care needs (Wk 9); the school nurse works with teachers, parents, and community organizations in health promotion (Wk 10); the school nurse collaborates with teachers and other

professional in child abuse reporting (Wk 11); the school nurse collaborates with educators in the 504 process to meet the educational needs of students under IDEA (Wk 12); the school nurse collaborates with other assessment team members and parents in the IEP process (Wk 13); the role of the school nurse in 0-3 programs in works with teachers and parents in assessing health needs and developmental readiness to learn (Wk 14).

Collaboration addressed in NURS 185, School Nurse Seminar: Collaboration addressed in didactic coursework. Evidence of the importance of interdisciplinary collaboration is addressed in weekly questions throughout the semester. Examples of this are: School nurses as managers in understanding job satisfaction of subordinates (Wk 1); role of the school nurse in working with other school site professionals in coordinated school health programs at the secondary level (Wk 2); school nurse role in supporting student success by working with other school professionals (Wk 3); school nurse working with faculty to provide a worksite health promotion program (Wk 4); the school nurse collaborates with teachers in providing health promotion and instruction to pupils (Wk 5); the school nurse collaborates with teachers in offering school site tobacco cessation and substance abuse prevention programs (Wk 6); school nurse collaborating with teachers to provide HIV/AIDS education to secondary pupils (Wk 7); the school nurse working with teachers and other professionals to assist pregnant and parenting teens (Wk 8); the school nurse collaborates with school site counselors and health professionals to provide assistance to students with mental health issues (Wk 9); the school nurse collaborates with other school site professionals to develop a crisis intervention team (Wk 10); the school nurse collaborates with other school site professionals and community health professionals to develop a school site emergency plan (Wk 11); school nurse plays a role in establishing and working with other health care professionals in a school based clinic (Wk 12); the school nurse working with other school site professional in grant writing and establishing programs (Wk 13); the school nurse as a team member in suspension and expulsion hearings (Wk 14); the school nurse collaborates with school site administrators in the interview process to recruit qualified health office staff (Wk 15).

Collaboration addressed in NURS 186 (School Nurse Practicum I): The importance of collaboration is clearly demonstrated in the Cross-Cultural Special Ed Case Study assignment. In order to complete this assignment, students must see themselves as members of an assessment team, and as such, must work together with that other team members to resolve problems that may impact the child's ability to learn. As a member of that team, students must spend time collaborating with the regular classroom teacher; parents/guardians; other members of the assessment team, i.e., school psychologist, RSP (Resource Specialist Program) teacher and/or SDC (Special Day Class) Teacher; health care professionals in the community and with other outside agencies. To give candidates insight into how school site professionals work with community agencies and the court system, students are asked to respond to a journal question (module II) that asks the candidate to discuss the function of a SARB (Student Attendance Review Board), review district policies regarding attendance and referral, and to discuss school

nurse interventions and collaboration. Students are strongly encouraged to attend a SARB meeting and to write the experience up in their clinical journal. Candidates must collaborate with the classroom teacher in order to planning, develop and carry out a health teach in the classroom (see NURS 186 Syllabus for assignment details). Another areas that requires a great deal of collaboration for students is in planning and carrying out state mandated screening and in other types of health screening, i.e. dental, at school sites. This requires collaboration with administrators, teachers, and assistance from health clerks and often times parent volunteers. (See N186 Syllabus for assignment details). Further, students are also encouraged to attend various school related meetings that involves collaboration and participation, such as school site committee, faculty, and parent meetings; and when appropriate, a School Board Meeting (An example of this would be in relation to the NURS 186 Policy/Procedure Paper assignment where the student has participated in the development of a new health policy that requires School Board approval.).

Collaboration addressed in NURS 187 (School Nurse Practicum II): Students have numerous opportunities to collaborate with parents, teachers, counselors, administrators, office personnel, unlicensed assistive personnel, health care providers, community agencies, law enforcement representatives and others in meeting the various health related needs of adolescents and in providing health teaching, counseling, and in health promotion. Two assignments exemplify the need for collaboration at the secondary level: a Health Education Curriculum Proposal assignment where students must collaborate i.e., with a P.E. teacher in order to incorporate meaningful health curriculum into what already exists, such as curriculum related to the importance of sun protection in with outdoors sports. The other example, an Aggregate Teaching/Small Group Activity assignment, where candidates must collaborate with teachers, and possibly counselors and/or the school psychologist in order to bring together a small group of students in discuss health issues specific to that group, i.e., pregnant teens. Still other examples would be: working with school site professionals to plan or participate in implementing a coordinated school health program (An example of an Experience School Nurse Project for a candidate with two or more years of school nursing experience.), or collaborating with teachers, administrator, and community agencies in planning and carrying out a health fair at the school site relative to adolescent health issues. Under the supervision of a qualified school nurse preceptor, candidates in NURS 187 have numerous opportunities to collaborate with health professionals in the community in coordinating health care for adolescent students, i.e., pregnancy, suspected sexually transmitted diseases, mental health issues, threatened suicide, crisis on campus, other.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E37 and S38 for candidate ability to understand and demonstrate a collaborative approach to providing and/or facilitating health-related activities, including acting as a member of a team addressing student achievement.

See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Syllabus, Evaluation of Student Professional Dispositions:
Disposition 5, “Candidate demonstrates a collaborative disposition.”

Criterion 9: The program provides opportunities for the candidate to demonstrate effective communication, using a variety of supporting technology, to a wide range of audiences including students, staff, parents and community:

Writing skills demonstrated in coursework and field experience: In admission application, candidates are required to write a letter expressing their interest in school nursing. This letter gives the program coordinator initial insight into the candidate’s written communication skills. Coursework within the program is also directed toward the importance of effective communication. In seminar courses (NURS 184, Introduction to School Nursing, and NURS 186, School Nurse Seminar): Candidates demonstrate their writing skills in through responding to weekly research questions; participating in discussion following online presentations by fellow classmates; and through their own online Blackboard presentations to classmate, either a word document or PowerPoint presentation. Writing skill is also evaluated through other written assignments, i.e. in NURS 184: a *Personal Philosophy of Nursing*; a write up on a school board meeting; and an assignment related to cultural differences. In NURS 185, School Nurse Seminar: Candidate writing skills are demonstrated through writing an Interdisciplinary Paper; a paper on adolescent mental health issues; and a *Legislative Paper*. In practicum courses (NURS 186, Practicum I, and NURS Practicum II): Candidates must keep weekly journals related to clinical experiences, respond to clinical journal questions, complete a Cross Cultural Case Study, and a write up on a health teach. In NURS 187), School Nurse Practicum II: Candidates must keep weekly journaling related to clinical experiences; responses to clinical journal questions write a newsletter; and a write up on either a classroom teach or experience facilitating a discussion for a small group of students related to a health issue(s). While being supervised by a qualified school nurse preceptor in field experiences, candidates have ample opportunities to use written communication in communicating with parents, referrals to health care providers, notices to teachers, other forms of correspondence, and in documenting on health records (both electronic and hard copy) and other forms of correspondence. It should be noted that candidates are expected to proof read their written work before submitting it. Points are taken off written assignments and papers may be returned if necessary. Evaluation criteria employed by faculty are: Candidates use of APA format with sources cited, clarity, organization, support for ideas

expressed, and grammar. This includes all written assignments. Candidates are made aware of the *University Policy Statement* related to consequences of cheating, plagiarism, and infringement on copyright rules.

Need for effective verbal/oral communication with regard to a wide range of audiences, including students, staff, parents, other professionals, and community is addressed in coursework: Candidates are required to take *COUN 174, Introduction to Counseling*, or *COUN 200 (3U)* prior to entering core school nurses courses. This course gives candidates insight into counseling theories and techniques which they will use in communicating with students and families in their school nursing practice. The role of the school nurse with regard to oral/verbal communication with students, families, staff, and other professionals at school sites and in the community is addressed. In *NURS 184, Introduction to School Nursing*, candidates are expected to gain insight into the role of the school nurse in health promotion school site staff through inservices such as Blood Borne Pathogens precautions, child abuse reporting, communicable disease control, and other relevant health matters (Wk 10). In *NURS 185, School Nurse Seminar*, a meaningful assignment that requires a demonstration of verbal communication skills is the *Interdisciplinary Interview Paper*, which requires candidate assertiveness and good verbal and non-verbal communication skills. In this case, the candidate must interview and shadow three different school site professionals to gain insight into their role on the educational team and at the same time, share about the role of the school nurse. These professionals can be administrators, counselors, school psychologist, teachers, etc. This assignment is insightful for candidates and strengthens their perspective of their own role as a member of the team.

Verbal/oral communication with a wide range of audiences is demonstrated in practicum experiences in *NURS 186* and *NURS 187* where candidates have ample opportunity to exercise their verbal/oral/body language communication skills with students, staff families, and other professionals while under the supervision of a qualified school nurse preceptor by counseling and teaching students, staff, and families on related health matters; through health promotion, and working with community agencies and programs in the effort to make the appropriate refer or to connect families with resources. Following are some examples where candidates demonstrate effectiveness with regard to oral communication: In *NURS 186, School Nurse Practicum I*, candidates are asked to carry out a *Cross-Cultural Special Ed Case Study* assignment that requires good verbal, non-verbal skills, and counseling skills, as well as the ability to demonstrate sensitivity to cultural differences, i.e., candidates must be able to communicate effectively through language barriers and with different cultural values and beliefs. As a member of the education team, candidates are also expected to participate in team meetings to provide oral reports, i.e., SST (Student Study Team) meetings or IEP (Individual Education Plan) meetings. This requires the ability to communicate effectively with other professionals in the educational setting and advocate effectively for a child or parent. In practicum courses, candidates demonstrate their oral/verbal communicate effectiveness when presenting a health

lesson to students in the classroom at the elementary and secondary levels. School nurse preceptors are expected to sit in on these presentations along with the classroom teacher to offer the candidate feedback on the presentation. Learning outcomes related to lessons taught by candidates must also be clearly demonstrated and candidates are asked to write a personal critique on their own perceived teaching effectiveness. Candidates gain insight into the importance of good verbal and non-verbal communication in working effectively with administrators and other school site personnel. There is a clinical journal question in NURS 186, an ice breaker, that requires students to interview a school site principal regarding his/her perceived view of the role of the school nurse and, at the same time the candidate must share insight about the role of the school nurse with that principal. Candidates are also directed to speak with other school site personnel regarding their perceived role of the school nurse. The candidate's preceptor observes the candidates verbal and non-verbal communication skills in assisting students who come into the Health Office and communication with faculty and staff. While spending time with a school nurse preceptor, candidates are urged to present, or participate with their school nurse preceptor in presenting at a faculty meeting and take on leadership roles themselves which include presentations at school board meetings, faculty meetings, to a parent groups, or community groups. To encourage candidates in this endeavor, they are allowed to count time used in preparation for the presentation towards practicum hours. A question posed for class discussion in NURS 186, School Nurse Practicum I, asks candidates to discuss the importance of presenting at faculty meeting in the beginning of the school year.

Criterion 10: Candidate use of various and appropriate methods of communication, including use of technology, in interacting and sharing information with clients and others:

In practicum courses, candidates learn about the different types of communication technology software that can be used with computers at school sites, i.e., software programs for record keeping; data collection, such as student visits to the health office, data on health conditions among students at school, screening results and statistics; data gathering to validate outcome based practice, and use of software such as SAS by education teams for writing up and storing IEP (Individual Education Program) initial and annual reports. Candidates learn the rules regarding sharing confidential information, i.e., health information with teachers and others on an individual "need to know basis"; forbidden use of confidential health lists to teachers and staff; concerns for confidentiality with regard to fax and email communication; using computer programs that block access by others; and location and care of computers to avoid observation or accessed by others. Candidates also recognize that counseling and discussions related to persons and confidential matters must take place away from the main health office. Candidates learn when to and not to share confidential information. In seminar coursework candidates gain insight into the laws (FERPA, Federal Family Educational Rights and Privacy, and HIPAA, Health Information Portability and Accountability Act) regarding confidentiality related to

documentation and information that can and cannot be shared with other care providers, teachers, parents, others, without written consent. Candidates gain insight into issues concerning confidentiality as it relates to student health records as part of the student educational record and what should and should not be recorded in a student's health record, and the importance of appropriate documentation. In practicum experiences (NURS 186 and NURS 187), candidates have the opportunity to put this knowledge into practice and, with guidance from a qualified school nurse preceptor, learn the art of balancing the right of individuals, confidential healthcare, support, and confidentiality in their communications with students, parents, care providers, and others. With regard to counseling by candidates: As previously mentioned, candidates are required to take COUN 174 (or 200), Introduction to Counseling, which prepares them to counsel with school age children, adolescents, families, and others. Candidates learn the importance of counseling skills in history taking as it relates to health issues, child abuse issues; and especially at the secondary level, where candidates are in a position to speak with adolescents regarding confidential matters such as pregnancy, sexually transmitted diseases, substance abuse, possible date rape, gender issues, eating disorders, depression, thoughts of suicide, other.

See Sec. 3 (p. 396 and p. 401): NURS 186 and NURS 187 Preceptor Syllabus checklists – E36 and S39 for candidate competency in use of various types of effective communication, including technology, with a wide range of audiences including students, staff, parents, and community.
See Sec. 3 (p. 407): NURS 186 and NURS 187 Preceptor Evaluation of Student Professional Dispositions: Disposition 5, “Candidate demonstrates a collaborative disposition.”

Criterion 11: The program helps candidate apply his/her entry level knowledge of the standard nursing process of assessment, diagnosis, outcome identification, planning implementation, and evaluation specifically within the school setting in order to resolve or reduce barriers to student learning:

The Nursing Process addressed in core school nurse courses: Candidates entering the program are already familiar with the nursing process which was introduced to them in their undergraduate programs, however, throughout the core school nurse courses they are re-introduced to it again as it relates to school nursing practice. The required program publication by the National Association of School Nurses, (2005) *School Nurse: Scope & Standards of Practice*, and author Susan Proctor in the text edited by Janice Selekman, (2005) *School Nursing: A Comprehensive Text*, both clearly give candidates an understanding of how the nursing process is adapted for use in school nursing practice. Candidates learn that the components of the nursing process relate to a competent level of nursing care in school nursing practice as they do in all other areas of nursing. Though the content and nature of the assessment may vary there remains the same legal responsibility to execute the nursing process in

accordance with the standard of care expected of a school nurse in a particular community and in congruence with the state Nurse Practice Act. Candidates in the program learn how to take the components of the nursing process and apply them in problem solving as they relate to the caring for the client or using them in other problem solving situations, i.e., determining need for, development, and evaluation of programs in an effort to reduce barriers to student learning.

Following are some examples of how the Nursing Process is addressed in weekly questions for candidates in NURS 184, Introduction to School Nursing: (Wk 1) The standards of practice as they relate to client care in the school setting; the Nurse Practice Act as it relates to school nursing practice with common threads of responsibility; (Wk 2) components of the nursing process with application to the candidate's own school nursing practice; evidence based practice; impact of school nursing practice on school performance; (Wk 3) the importance of identifying outcomes and outcome evaluation in school nursing practice; (Wk 8) use of the Nursing Process in caring for students with chronic health conditions; (Wk 9) Use of the Nursing Process in the developing individual healthcare plans; NANDA nursing diagnosis and use of standardized language in school nursing practice. Examples where the nursing process is addressed in NURS 185, School Nurse Seminar, are as follows: (Wk 2) Standards of practice at the secondary level; (Wk 4) evidence based practice; (Wks 6-10) application of the nursing process as it relates to caring for adolescents with the following health related problems – substance abuse, sexually transmitted diseases, pregnancy, and various mental health conditions and related issues.

Application of the Nursing Process in Practicum courses (NURS 186 and NURS 187): candidates have the opportunity to put into practice what they have learned about the Nursing Process as it relates to school nursing practice. In NURS 186, an excellent example of an assignment that relates specifically to the Nursing Process is the *Cross-Cultural Special Ed Case Study* in which candidates must select preschool or elementary school age child who has been identified for possible placement in a special education program and for which the candidate must carry out the steps in the nursing process as the health professional on the SST (Student Study Team) and/or IEP (Individual Education Program) team. Throughout the clinical experiences in both the elementary practicum (NURS 186) and the secondary practicum (NURS 187) candidates have the opportunity to perfect their competency in carrying out the Nursing Process in actual school nursing practice under the supervision of a qualified school nurse preceptor, i.e., in the care of a child or adolescent with a chronic health problem such as asthma, diabetes, with a seizure disorder, blood disorders, or another chronic condition. Candidates also have the opportunity to use the Nursing Process in other problem solving situations in school nursing practice, i.e., participation in program development or in planning an age appropriate health lesson for children in a classroom. In whatever problem solving situation, candidates must demonstrate competency in use of the Nursing Process which includes: Assessment (collect comprehensive data pertinent to the client's health or the situation); diagnosis (analyze the assessment data to determine the diagnosis or issues), outcome identification (identify expected

outcomes for a plan individualized to the client or situation); planning (develop a plan that prescribes strategies and alternatives to attain expected outcomes); implementation (which may include all the following: coordinating care, providing health education or strategies to promote health and safety, consultation, prescriptive authority, procedures, treatments, and therapies in accordance with the law); and evaluation of progress toward attainment of outcomes.

See Sec. 3, p. 396 and p. 401: NURS 186 and NURS 187 *Preceptor Syllabus Checklists* – E2 and S1 for candidate competency in applying the Nursing Process within the school setting in order to resolve or reduce barriers to student learning.

PROGRAM STANDARD 8

Field Work Experience

Criterion 1: The program provides candidates with a broad range of hands-on school nurse field experience in a variety of setting.

School nursing candidates are required to complete two practicum courses—NURS 186 (School Nurse Practicum I) with an elementary school focus in the fall, and NURS 187 (School Nurse Practicum II), with a secondary school focus in the spring—for a total of 6 units and 135 practicum hours each semester (see Catalog). Of the 135 hours in each practicum, candidates spend ten (10) of those hours participating in online class discussion relevant to their clinical experiences in the field and five (5) hours are spent in conferences and in communication with the candidate's clinical instructor. Of the 135 hours, candidates without previous school nursing experience spend the remaining 120 hours in an on-site, guided practicum with a school nurse preceptor. Candidates currently employed as school nurses spend 80 hours in a supervised, guided practicum with their preceptor. Experienced school nurse students, those with more than two years of school nursing practice at a given educational level (elementary or secondary) are given the opportunity to spend up to twenty (20) of their practicum experience working on a special project that would benefit school nursing, their school district and/or other school nurses. Both the preceptor and the clinical instructor must approve this project. The special project gives experienced candidate an opportunity to work on something challenging and beyond the usual school nurse responsibilities. All candidates, regardless of number of required practicum hours, are required to spend 8-10 hours of practicum time (with preceptor approval) out in the community visiting local referral agencies, participating in relevant community activities such as health fairs, clinics, and/or relevant community meetings. Between 10-12 hours of practicum time may be spent attending district/local/state school nurse meetings, in-services, and/or conferences where candidates have the opportunity to learn and network with other school nurses. Candidates are encouraged to select a different preceptor and clinical sites for each practicum course experience in order to give them a broader perspective on school nurse roles and to increase their experience through working with different school nurses and with various cultural groups.

Integration of knowledge, theory and role concepts: In the practicum courses candidates have the opportunity to integrate knowledge, theory and role concepts from courses they have previously taken (Phase I courses) and from NURS 184 (Introduction to School Nursing and NURS 185 (School Nurse Seminar), apply different theories in their client care. From class discussions, reading current journal articles, website searches, researching answers to questions in NURS 184

and NURS 185 (seminars), completing other various assignments, visiting community agencies, participating in community activities, and in attending school nurse in-services/conferences, candidates gain knowledge and insight into contemporary school nursing and child/adolescent health related issues. In core school nurse courses students learn about the importance of comprehensive and coordinated school health programs and services, about collaboration with other school professionals, and community resources that are needed to assist children and families. In NURS 186 (School Nurse Practicum I), candidates have an assignment in which they are asked to speak with other school personnel and the school principal regarding their perception of the role of the school nurse. This is knowledge that candidates have the opportunity to use in their field experiences (NURS 186, NURS 187), i.e., inductive problem solving (nursing process), health promotion and teaching, counseling clients and their families, and caring for clients with special needs.

With regard to innovations in practice, more experienced school nurse candidates (those with two or more years of school nursing practice at a given educational level) are given the opportunity to contribute to school nursing by going beyond the usual role of the school nurse to work on a special project that would benefit school nursing or their school district. Candidates are required to have knowledge of the California Education Code and other state and federal codes/laws that apply to school nursing practice. Candidates are expected to have good communication skills. Written work is graded down or returned to candidates to be rewritten if it does not come up to acceptable standards. In NURS 186 and NURS 187 (practicum courses), under the watchful eye of the preceptor, candidates must satisfactorily complete skills and competencies found in the Preceptor Checklists of Skills and Competencies in the *NURS 186/NURS 187 Preceptor Syllabus*.

Criterion 2: Candidates are provided with a preceptor for mentoring and supervision during the field experience.

Candidates are provided with a preceptor for mentoring and supervision during the field experience. In this online program candidates are mentored and supervised by qualified school nurse preceptors at school sites in the area of the state in which the candidate plans to practice school nursing. A comprehensive *NURS 186/NURS 187 Preceptor Syllabus*, along with a person to person phone conference with the candidate's a clinical instructor, orients the preceptor to roles and responsibilities for the preceptor, the student, and the clinical instructor. A Preceptor Checklist of Skills and Competencies and a Suggested Guidelines for Time Spent in Clinical Practice (see Preceptor Syllabus) are expected to be utilized by the preceptor to guide the development of student goals and objectives and attainment of skill and competencies. At the end of the practicum experience, the preceptor meets with the candidate to review the Preceptor Checklist of Skills and Competencies and Preceptor Evaluation of Student Professional Dispositions. At the end of the Preceptor Checklist of Skills and Competencies, the question is

asked if the preceptor would recommend the candidate for the Clear Professional School Nurse Services Credential relevant to that practicum experience. These evaluation forms must be returned to the clinical instructor, along with a Preceptor Evaluation of the Course, by the end of the semester before a final grade can be posted. The program coordinator uses these evaluation tools in conferencing with candidates and in completing exit evaluations for candidates after program coursework has been completed.

Criterion 3: The program has a clearly defined and systematic process for the identification, selection and assignment of qualified preceptors:

Before official arrangements can be made between a candidate and a preceptor, a Student Intern Agreement (University-Agency Contract) must exist between the agency in which the field experience is expected to take place and university. To begin the process, candidates are notified in their April Program Acceptance Packet of the need for this agreement. Because these agreements often need Board of Education approval, and may take 6-8 weeks to complete, candidates are advised to begin as soon as their packet is received to determine if such a contract exists between the agency in which he/she is interested in taking field experience and the university. To do this candidates are asked to contact the individual in the CSUF Department of Nursing, whose responsibility it is to initiate these contracts, to enquire as to the existence of such a contract which is in effect for 5 years once initiated. If a contract is not in place, a contract will be initiated by the Department of Nursing and sent to the responsible administrator in that agency (clearly defined steps are included in packet information and in the NURS 186/NURS 187 *Preceptor Syllabus*). It should be noted that an agreement must be in place even if the candidate takes field experience in the district in which he/she is employed, as that candidate is not an employee during the time he/she is a student school nurse working with a preceptor away from the candidate's worksite.

To qualify as a preceptor, a school nurse must have five full years of school nursing experience, hold a Clear Professional School Nurse Services Credential, and have the approval of their immediate supervisor to act in that capacity. Preceptors must also provide vitae that are reviewed by the program coordinator or the candidate's clinical instructor. Candidates are advised by program faculty regarding the steps involved in obtaining a qualified school nurse preceptor: (1) It is recommended that candidates speak the program coordinator regarding assistance in obtaining a qualified preceptor. In this case the program coordinator will assist the candidate by contacting directors of health services in school districts in the area where the candidate plans to take his/her field experience to discuss the need, explain the criteria, and to ask the director to pole qualified school nurses in the district regarding interest. Or, since the candidate is permitted to have a preceptor in the district in which he/she is employed, candidates may discuss the need for a qualified preceptor with his/her immediate supervisor, who in turn is asked to contact the program coordinator for details and to pole qualified school nurses regarding interest.

Occasionally, candidates have someone in mind who they would like to invite to be their preceptor, in which case, that school nurse must meet the criteria and have written approval from his/her immediate supervisor to act in that capacity. (2) In determining a school nurse's qualifications to act in the capacity of a preceptor, the student's clinical instructor confirms the existence of a signed "Immediate Supervisor Approval for Employee to Act as Preceptor" document and reviews the potential preceptor's vitae qualifications. (3) When a perspective preceptor agrees to precept a candidate, that school nurse is asked to email the clinical instructor as soon as possible to notify the instructor of his/her interest. The clinical instructor can then respond in a timely fashion to express appreciation and to discuss roles and responsibilities. Once the perspective preceptor is found to be qualified, the clinical instructor notifies the candidate. (4) Candidates are then responsible for setting down with their new preceptor and to thoroughly review NURS 186/NURS 187 *Preceptor Syllabus* details, as well to go over their own course syllabus to give the preceptor insight into course assignments and objectives so the preceptor can assist the candidate with experiences and time management to accomplish these. (5) Preceptor vitae are kept on file for four years in the Credential Program office. At the end of each clinical course, students complete an evaluation on their preceptor experience. If preceptors receive unfavorable comments from a candidate, that school nurse will not be invited back to act as a preceptor for future students.

Criterion 4: The program bases field experience assignments on an individual assessment of each candidate's prior background and experience:

The candidate's practicum experience is geared to his/her personal learning and experiential needs based on prior school nursing experience. At the beginning of each practicum course, with input from a school nurse preceptor, candidates are expected to develop personal student goals and learning objectives that reflect areas where experience is lacking and/or areas of interest. The opportunity for candidates to have personal input in the development of their goals and learning objectives allows them to assess their current levels of school nursing knowledge and competencies, and to go beyond that to gain new knowledge and to strengthen other areas of weakness in their school nursing practice. For candidates new to school nursing, goals and objectives must address basic school nursing experiences. To ensure a well rounded clinical experience for those new to school nursing, a suggested breakdown of hours related to school nursing practice is included in the *NURS 186/NURS 187 Preceptor Syllabus*. Experienced school nurse candidates, those with two or more years of school nursing practice at a given educational level, are expected to reach beyond basic school nursing practice to new and different experiences in creating their goals and objectives. Candidates are expected to develop at least three global clinical goals each semester, which must include meaningful learning objectives and learning activities to fulfillment of each of these goals. Student goals and learning objectives are meant to supplement course objectives and candidates are expected to satisfactorily demonstrate

required skills and competencies for each practicum course. With approval from the candidate's clinical instructor, school nurse students new to school nursing are encouraged to use up to 10 practicum hours participating in leadership activities relevant to school nursing, such as presenting at a faculty meeting or spear heading an activity or clinic; while experienced school nurse students, those with two or more years of school nursing experience in at a given educational level, are given the opportunity to use up to 20 practicum hours participating in an Experiences School Nurse Project that is meaningful to other school nurses or health services, and which requires writing a proposal which must be approved by the candidate's preceptor and clinical instructor. With their preceptor, candidates are expected to review their goals and objectives periodically throughout the semester to be sure progress is being made. During a mandatory mid-term conference between candidate, preceptor, and clinical instructor, candidate progress is reviewed and discussed; and again at the end of the semester at which time the candidate critiques his/her personal learning experience and writes a *Final Narrative Self Evaluation*, in which the candidate cites his/her accomplishments and identify strengths and areas of weakness the candidate will continue to work on to improve.

Criterion 5: Working collaboratively, course instructors and preceptors encourage and enable candidates to function appropriately and effectively in a school nurse role:

Along with having a qualified school nurse preceptor to supervise and mentor each candidate at a school site(s), the candidate also have an experienced clinical instructor who holds a master's degree or higher, a professional School Nurse Services credential, and who also has extensive school nursing experience in the community. In the online program the importance of keeping lines of communication open between the candidate, the preceptor, and clinical instructor cannot be over emphasized in order to provide quality guidance and supervision. Contact information i.e., telephone numbers, email addresses, and mailing addresses, are shared as soon as possible in the beginning of the semester. Prior to the candidate's field experience, clinical instructors are expected to contact preceptors to go over roles and responsibilities of the preceptor, the candidate, and the clinical instructor, to ensure that there is a clear understanding on the part of all parties. Candidates are not expected to begin field experience until the 3rd week of the semester to give them ample time to make all the necessary arrangements and to turn in the required documentation to their clinical instructor, though candidates are free to begin their field experience sooner if everything is in order. Roles and responsibilities for all parties are clearly outlined in the *NURS 186/NURS 187 Preceptor Syllabus*. Preceptors are expected to act as role models for candidates, as well as to mentor and supervise. Candidates are informed that they are expected to conduct themselves responsibly, ethically, and professionally, and to abide by school site standards. Clinical instructors are to be available to preceptors to provide ongoing support and to respond to any questions and concerns, as well as to supervise the candidates learning experience.

Conferences between clinical instructor, preceptor and candidate are encouraged throughout the semester whenever there are questions, a need or concern. Initial conferences between the clinical instructor and the candidate focus on assisting the candidate in gaining the best possible clinical experience. An example of this would be assisting students with locating clinical sites and a qualified preceptor in their geographical area. An example of an initial conference between a candidate and a preceptor would be to work together in identifying meaningful student goals and learning objectives to be accomplished during the semester. Clinical instructors review the student's goals and learning objective, giving final approval or making recommendations for changes before the student begins his/her clinical practice. There is a mandatory 3-way conference that must take place in mid-semester between the candidate, the clinical instructor, and the preceptor. This is an opportunity for the student to review progress towards accomplishing goals and objectives and, if necessary, to revise a goal, learning objective, or learning activity that will lead to a better learning outcome. To prepare for this conference, candidates are asked to meet with their preceptor to go over accomplishments and any problem areas that need to be discussed during the conference. For candidates within reasonable driving distance of the university, the conference will take place at a school site where the candidate is taking his/her field experience, for distance learners, this will be a 3-way telephone conference. Telephone conferences may take up to an hour to accomplish. Mid-term conference notes are kept by the clinical instructor and placed in the candidate's university file.

Preceptors are expected to work with, and meet to conference with, candidates throughout the semester to mentor and assist candidates in meeting their goals and objectives, as well make progress toward accomplishing required skills and competencies as spelled out in the Preceptor Checklist of Skills and Competencies located in the *NURS 186/NURS 187 Preceptor Syllabus*. At the end of the semester, another meeting must take place between the candidate and preceptor to review accomplishment of skills and competencies and to discuss strengths and those areas needing further improvement.

Throughout the semester, clinical instructors read through the candidate's weekly journal entries and provide written feedback to the candidate in a Student Progress Report provided to the candidate at the end of each of the four semester modules. Clinical instructors are available to candidates throughout each week in the semester in "Ask Your Instructor" in the online Blackboard program, by email, telephone, or in person during office hours, to give candidates feedback, make recommendations, assist them in working out clinical time issues, and/or complement them on the work that they are doing. Clinical instructors monitor online class participation in discussion and post weekly prompts and problem solving scenarios to stimulate candidate participation. Candidates are also encouraged to come up with subject matter for discussion, pose questions of classmates and request feedback.

Strengthening faculty, preceptor, candidate connections in the online program: Preceptors are invited to network with faculty during arranged meetings with candidates who attend annual

CSNO (California School Nurse Organization) conferences. Program faculty members also network with preceptors in the Central Valley at local school nurse meetings and Central Valley Section CSNO conferences. Students are encouraged to invite their preceptors to student networking meetings in their local areas, as well as to consider inviting preceptors to an appreciation luncheon on completion of clinical experience. At the end of the semester, the program coordinator writes a letter of thank you to all preceptors, and sends a *Certificate of Appreciation*. Preceptors who receive positive evaluations from candidates are strongly encouraged to return to precept other candidates in the future. The ongoing willingness and professional commitment of school nurses to take on the role of preceptor cannot be over stated.

See Sec. 3 (p. 380): NURS 186/NURS 187 Preceptor Syllabus for guidelines related to preceptor, candidate, and clinical instructor roles and responsibilities;

See also Sec. 3 (p. 216 and p. 346): NURS 186 and NURS 187 course syllabi for guidelines for candidate responsibility with regard to journaling, class participation, and communication.

See also Sec. 3 (p. 412): Initiating a University-Agency Agreement.

PROGRAM STANDARD 9

Assessment of Candidate Competence

Criterion 1: Prior to recommending each candidate for a Health Services: School Nurse Credential one or more persons responsible for the program determine, on the basis of thoroughly documented evidence, that each candidate has demonstrated a satisfactory performance on a range of School Nursing Competencies (SNCs).

The program coordinator is responsible for evaluating the candidate's accumulated coursework, and verifying the existence and currency of all required documents, and for ascertaining that the candidate has met the required clinical skills and competencies that will determine if the candidate is eligible to apply for a Clear Professional School Nurse Services Credential based on sound documentation. A check-off sheet is initiated when an application is received by an applicant and attached to the front of the perspective candidate's file. This check-off sheet, kept current throughout the period of time the candidate is in the program, includes dates of advising sessions; verification of receipt of required documents, licensure and certificates; confirmation of completed program course coursework, and GPA (Notes: A 3.0 GPA must be maintained throughout program coursework). This time saving tool is used by the program coordinator to determine completeness of a candidate's file and fulfillment of program requirements. Once the program coordinator is satisfied that the candidate has complied with all coursework required, and after reviewing the candidate's CSUF transcript for completeness, the coordinator signs off on the Exit Statement on the back of this same check-off form which now becomes the **Exit Clearance Form** that is send to the CSUF credential analyst as proof the candidate has complied with all program requirements. The candidate is then notified that he/she may apply for a Clear School Nurse Services Credential once two full years of school nurse employment have been verified. Steps for applying for a Clear credential are spelled out in NURS 186 and NURS 187 practicum course syllabi, as well as in the Documents section in the Blackboard software program.

The following are reviewed and verified for satisfactory completion:

- Program coursework while maintaining a 3.0 GPA: CDDS 125, Audiometry for School Nurses (3U); PSYCH 168, Abnormal Psychology, or SPED 120, Mainstreaming the Exceptional Child (3U); COUN 174 (or COUN 200) Introduction to Counseling (3U); NURS 136, Health Appraisal (3U); NURS 137, Teaching Strategies for the Healthcare Client (3U); NURS 183, Vision and Scoliosis in the School Setting (1U); NURS 184, Introduction to School Nursing (3U); NURS 185, Seminar in School Nursing (3U);

NURS 186, School Nurse Practicum I (3U); and NURS 187, School Nurse Practicum II (3U).

- Satisfactory completion of NURS 186 and NURS 187 clinical skills and competencies which have been verified by the candidate's preceptor in each practicum course by initialing and signature on the final page of the document, "Preceptor Checklist of Skills and Competencies." This checklist of skills and competencies is in keeping with the 2007 CCTC standards and addresses skills and competencies specific to primary, secondary and tertiary prevention, and professional management. Other things that are verified by the program coordinator are candidate completion of required clinical hours and the preceptor response to the question, "Would you recommend this candidate for a Clear Professional School Nurse Service Credential." As noted in the NURS 186 and NURS 187 syllabi, candidates who fail to demonstrate competence in a specific area, may be required to spend additional time with his/her preceptor to demonstrate competence in that particular area if other arrangements have not been made.
- "Preceptor Evaluation of Student Professional Dispositions" another evaluation tool reviewed by the program coordinator. These dispositions adopted by the CSUF Kremen School of Education and Human Development in keeping with NCATE (National Council of Accreditation for Teacher Education) requirements are expectations for all credential candidates throughout the university. On entrance to the core school nurse courses in the program, school nurse candidates are given a written and verbal explanation of these dispositions during a program orientation and informed that the candidate's preceptor will rate candidate competence in these areas using a 5-point (Excellent, Very Good, Good, Fair, Poor) Likert scale at the end of each practicum experience. Preceptors are also given an explanation of the dispositions and written instructions on rating candidates. Candidates are rated on the following: *The Ability to Reflect, to demonstrate critical thinking, to make ethical judgments, have the tendency to value diversity, demonstrate a collaborative disposition, and demonstrate enthusiasm for life-long learning* (See document in N186/187 Preceptor Syllabus). As a rule, school nurse candidates rate well in these dispositional areas because, as nurses, they have already been exposed to them in their undergraduate programs, as well as in their nursing practice prior to entering the program, though they may not have known them as "disposition." Should a candidate rate low in any one of these areas, an appropriate type of remediation will be recommended.

Criterion 2: The program uses formative (constructive) assessment processes to inform candidates of their status in relation to the SNCs, and to assure that candidates have the appropriate knowledge, skills and abilities prior to being recommended for the credential:

Candidate competence related to the school nurse role is assessed in phase I courses prior to entering core school nurse courses. In NURS 136, Health Assessment, candidates are required to demonstrate competence in carrying out physical assessment skills in a classroom setting on manikins and classmates on the various systems. Candidates are observed during return demonstrations, and if competence is not demonstrated, the candidate is asked to repeat the skill until competence is demonstrated. This also true in CDDS 125, Audiometry of School Nurses, where candidates must demonstrate competence in screening hearing and in carrying out hearing thresholds on clients under the supervision of an audiologist or another qualified professional who offers constructive feedback. Again, in COUN 174, Introduction to Counseling (or COUN 200), candidates are observed for their ability to use appropriate counseling techniques when counseling in mock counseling sessions and constructive feedback is given.

Constructive assessment processes used in seminar courses (NURS 184, Introduction to School Nursing, and NURS 185, School Nurse Seminar). In these courses, candidates are expected to expand their knowledge of school nursing and school nursing practice related to legal guidelines, standards of school nursing practice, client care, and the multifaceted role of the school nurse as demonstrated through written assignments, responses to weekly research questions that requires researching current journals and course texts, participating in the development and presentation of an online Blackboard presentation for classmates, and in meaningful participation in class discussion following Blackboard presentations. Faculty critiques Blackboard presentation by candidates and offers constructive feedback and acknowledgement for quality and creativity. Classmates are also invited to rate Blackboard presentations by fellow classmates. Faculty also monitors candidate participation in class discussion following presentations, provides feedback, and assigns points accordingly. Written work turned in by candidates at the end of each module, of which there are four modules in a given semester, is read, a point value assigned to each paper with faculty constructive comments. A “Progress Report” sheet is also generated at this time which includes a breakdown of module points earned, summary comments regarding quality of work and acknowledgement for work well done. Both the graded paper and the progress report are sent to the candidate through the candidate’s online grade book. Candidates are invited to contact their instructor at any time with concerns regarding assignments and/or grades.

Constructive assessment processes used in practicum courses (NURS 186, School Nurse Practicum I, and NURS 187, School Nurse Practicum II). Candidates are required to spend practicum hour under the supervision of a qualified school nurse preceptor who monitors and supervises their clinical activities and provides constructive feedback. In the beginning of the semester, one of the first responsibilities the preceptor has is to assist the candidate in developing

realistic student goals and objectives that include learning activities that will meet those goals and lead to a meaningful clinical learning experience. The clinical instructor has final approval of the candidate's goals and objectives and offer constructive input as necessary. Candidates will be asked to rewrite goals and objectives they are not relevant or appropriate for the learning needs of the individual candidates. Once the candidate's goals and objectives have been approved, clinical hours may begin in earnest.

Constructive feedback provided after reviewing candidate clinical journaling: Candidate must journal of weekly clinical activities. Journaling must include specific experiences that the candidate can relate to a meaningful learning experience and can apply to his/her own school nursing practice. Clinical instructors monitor candidate clinical activities through their journaling and are then able to provide constructive feedback to the candidates with regard to relevancy of those activities in keeping with planned learning experiences. For example, in "Suggested guidelines for time spent in clinical practice" in the *NURS 186/NURS 187 Preceptor Syllabus*, guidelines have been established to prevent overspending time participating in one particular experience, i.e. excessive times spent in school wide screening, that threatens to skew the candidate well rounded learning experience. Preceptors are asked to review the candidate's journaling periodically. Candidates are required to turn in journaling for review by clinical instructors at the end of each of the four modules in a given semester and the clinical instructor provides the candidate with constructive through a written Progress Report. The clinical instructor contacts the candidate directly if an issue warrants.

Constructive feedback provided to candidate during Mid-Term Evaluation of Clinical Progress: Within the specified mid-term timeframe, the candidate is asked to sit down with his/her preceptor to discuss the candidate's progress toward accomplishing the candidate's "Student Goals and Learning Objectives" which were created by the candidate with input from the candidate's preceptor in the beginning of the semester. At this time the preceptor and candidate are also expected to review progress toward meeting school nurse skills and competencies as spelled out in Preceptor Checklist of Skills and Competencies in the *NURS 186/NURS 187 Preceptor Syllabus*. Following this meeting with the candidate's preceptor, a mandatory 3-way conference must take place between the candidate, preceptor and university clinical instructor to discuss the candidate's progress and to resolve any problem areas or concerns. This is also an opportunity, if necessary, for the preceptor and the clinical instructor to make constructive suggestions on ways the candidate can improve his/her learning outcomes or strengthening a learning experience through adding or making changes in an objective or learning activity. The clinical instructor completes a Mid-Term Progress Report on the meeting with the candidate and the candidate's preceptor which is filed in the candidates cum.

Preceptor Checklist of Student Clinical Skills and Competencies, which is the most useful tool to inform candidates of their status in relation to the SNCs. For each practicum course there is a

checklist of clinical skills and competencies specific to that particular educational level that meets CCTC (2007) standard guidelines. The Preceptor Checklist of Skills and Competencies can be use by the preceptor in assisting the candidate in developing meaningful goals and objectives in the beginning of the semester, as an tool that can also be used by the preceptor throughout the semester to document met skills and competencies, and in directing, mentoring, and supervising the candidate in mastering these skills and competencies, and keeping track of candidate progress towards completing the required list. If a experience does not present itself within the semester timeframe, the preceptor and student are expected to discuss the skill to the length that the candidate has the understanding and insight to how it should be carried out in his/her own school nursing practice. Preceptors are advised that if an experience cannot be provided at the preceptor's school site(s), the preceptor is to make arrangements with another qualified school nurse in that district who is able to provide the experience. Each skill area and competency must be initialed by the candidate's preceptor and a written explanation provided if a skill or competency could not be mastered. The preceptor is to advise the candidate regarding areas of weakness and suggest remedies. If necessary, the candidates may be advised to spend additional time with that preceptor to accomplish the skill or competency.

Other constructive feedback offered to candidates related to their clinical competence (NURS 186 and NURS 187): The following is relevant to professional management skills and professional dispositions. In clinical practice, candidates are assessed by their preceptors and provided feedback on their ability to demonstrate knowledge of child and adolescent health issues, relate legal guidelines to school nursing practice; reflect on previous experiences and apply that knowledge to current situations; use critical thinking skills; demonstrate ethical judgment in decision making; demonstrate value for diversity; demonstrate the ability to collaborate and work effectively with others; communicate on a professional level, both written and verbal; demonstrate the ability to think creatively; plan, organize effectively, and schedule time wisely; and work successfully with children, adolescent, families, and in the community.

Examples of clinical experiences that relate to written assignments for which candidates need mentoring and direction, and for which candidates receive constructive feedback are: A comprehensive Cross-Cultural Special Ed Case Study that involves client and family assessment, insight into the IEP (Individual Education Plan) process, and effective communication and collaboration with other members of the education team; development of a health curriculum and teaching outline which must be carried out in a classroom setting; facilitating discussion on a health issue(s) with a small group; creating a newsletter at the secondary level; reviewing district health policies, and participating in making changes or creating a new policy that require School Board approval; and attendance at a School Attendance Review Board meeting for insight into process.

Candidate Narrative Self-Evaluation Related accomplishments in Clinical Experience:

At the end of each of practicum courses, candidates are asked to complete a Narrative Self-Evaluation in which they are discuss the length to which they were able to accomplished student goals and learning objectives; areas of major learning, strengths, weaknesses, new skills and improvements; and things they might have done differently to strengthen their clinical experience. This gives the candidate insight into areas they will continue to work on in their own nursing practice.

Pre/Post Program Knowledge base Self Assessment Questionnaire: On entry into core school nurse coursework (NURS 184, NURS 185, NURS 186, NURS 187), candidates are asked to complete a self reported knowledge base assessment questionnaire. At the completion of the final core nurse course (NURS 187, School Nurse Practicum II), candidates are asked to complete that same knowledge base questionnaire as a post assessment. This self reported growth in knowledge of school nursing gives the candidate insight into the level of learning that has taken place throughout core school nurse coursework. The questionnaire consists of 26 topic areas with sub-topics in each of these areas. Candidates frequently comment that they are surprised at the amount of learning that has taken place, especially candidates who enter the program after having practiced school nursing for two or more years.

Criterion 3: The evaluation of candidate competence is provided by at least one school nurse preceptor and one institutional supervisor:

In each practicum course (NURS 186 and NURS 187) the candidate's competence to practice school nursing is evaluated by a qualified university field supervisor (clinical instructor) who holds at minimum a master's degree, a Clear Professional School Nurse Services Credential, and who has an extensive background in school nursing practice in the community, which gives that field supervisor the necessary insight to effectively evaluate the candidate's performance in the field. The candidate's competence to practice school nursing is also evaluated by a qualified school nurse preceptor who is required to have a minimum of five full years of school nursing experience, hold a Clear Professional School Nurse Services Credential, and have the approval of their immediate supervisor to act in this capacity. Qualifications of potential school nurse preceptors are also reviewed by faculty before final approval is given. If a preceptor receives an unfavorable evaluation by a candidate at the end of the semester indicating a lack of commitment, that school nurse will not be invited back to act as a preceptor for future students.

In order to establish an effective ongoing working relationship between the university field supervisor and the school site school nurse preceptor in order for them to work together to

affectively evaluate a candidate's competence in clinical practice, communication between the university field supervisor and the preceptor is initiated as soon as possible in the beginning of the semester. Once approved, the school nurse preceptor is contacted by the university field supervisor to discuss roles and responsibilities of all three parties (the preceptor, the candidate, and the university field supervisor). The preceptor is also given a comprehensive *NURS 186/NURS 187 Preceptor Syllabus* which reinforces discussed roles and responsibilities, includes the necessary contracts, and most importantly the "Preceptor Checklist of Skills and Competencies" which the preceptor will be used to evaluate the candidate's abilities. Prior to beginning clinical practice, to ensure at the candidate and the preceptor both have a clear understanding of expectations in the *NURS 186/NURS 187 Preceptor Syllabus* and competencies expectations in the "Preceptor Checklist of Skills and Competencies," candidates are asked to sit down with their preceptor to review the syllabus together before starting clinical hours. Preceptors are also given insight into the need to evaluate the candidate in the area of "Student Professional dispositions," which the preceptor will need to do and to provide constructive guidance as necessary. Throughout the semester preceptors are expected to use the "Preceptor Checklist of Skills and Competencies" as a guide in directing and evaluating the candidate's performance, as well as to use to check off skills and competencies as they are observed and met. Conferences between the preceptor, candidates and university field supervisor are encouraged throughout the semester whenever a need arises. The preceptor is asked to meet with the candidate at mid-term and to evaluate progress related to student goals and objectives, as well as candidate progress with regard to skills and competencies. A mid-term 3-way mandatory conference follows between the preceptor, the candidate, and the university field supervisor to discuss candidate progress. At the end of the practicum experience, the preceptor is again asked to meet with the candidate to discuss accomplishments with regard to skills and competencies, and to determine at that time if these have been satisfactorily met. Preceptors are asked to sign the final page of the "Preceptor Checklist of Skills and Competencies" evaluation form to add validity to the document.

The evaluation forms, both the "Preceptor Checklist of Skills and Competencies" and the "Preceptor Evaluation of Student Professional Dispositions" must be turned in to the university field supervisor, along with a Preceptor Evaluation of the Course, by the end of the semester for the candidate to receive a final grade. The program coordinator uses these evaluation tools in conferencing with candidates and in completing exit evaluations for candidates after program coursework has been completed. The university field supervisor evaluates the candidate's field experience through reading required candidate journaling on clinical experiences, turned in at the end of each of the four modules in a given semester; through conferencing with the candidate and the candidate's preceptor, and through reading the candidate's papers and written work relevant to assignments, and response to journal questions.

SCHOOL NURSE COMPETENCIES (SNC)

School Nurse Competencies 1

By design, the program provides extensive opportunities for candidates to demonstrate their knowledge, skills and abilities with respect to the school nurse competencies as exemplified in the School Nurse Competencies (SNCs) provided in Appendix A.

SNC 1, Providing health and wellness services (Primary Level Intervention):

Criterion 1: Candidates for a School Nurse Services credential understand how to provide a wide range of health and wellness services for students and the school community, including but not limited to state-mandated screenings, required immunizations and health education:

In NURS 184, Introduction to School Nursing, primary prevention is addressed in the following weeks through weekly research questions: Week 2, coordinated school health programs related to primary prevention, Neuman's Systems Model as it relates to primary prevention through strengthening lines of defense; Week 4, Primary care and the role of the school nurse; Week 5, immunization programs, school entry immunization requirements; Week 6, identifying barriers to a healthy lifestyle; Week 7, dental screening in school; Nutrition services and the role of the school nurse; Week 10, health teaching and health promotion for students, faculty, staff.

In NURS 185, School Nurse Seminar, primary prevention is addressed in the following weeks through weekly research questions: Week 3, adolescent preventive services, health promotion and disease prevention for adolescents, coordinating a health fair; Week 4, framework for teaching health education, school nurse as health educator, the Group Process, creating and facilitating groups; comprehensive health education model; sex education for special learners, giving school board presentations; Week 5, activity and fitness, nutrition and weight control concerns related to specific sports involvement, healthy issues regarding female athletes; Week 6, various prevention and cessation programs; Week 7, health promotion and health education related to communicable disease; Week 8, health promotion and pregnancy prevention.

State mandated screening and other types of screening programs:

State mandated screening and other types of screening programs are addressed in core school nurse courses. Various screening programs are addressed in both seminar and in practicum courses where candidates participate in screening program activities in their clinical experiences:

CDDS 125, Audiometry and Audiology for School Nurses (3U) prepares students to obtain certification as a school audiometrist. It gives the student the necessary insight into reasons for hearing loss, basic assessment, management, and the fundamentals of interpretation. It also gives

the student awareness of the value of a hearing conservation program. School nurse students cannot participate in hearing testing in school without an audiometrist's certificate.

NURS 183, Vision and Scoliosis Screening in the School Setting (1U): If a perspective candidate has not CEUs through a workshop or university credit for a formal vision screening course prior to entering the program the candidate is required to take this course which is offered in August in conjunction with program orientation for candidates entering phase II core school nurse courses in the program.

NURS 184, Introduction to School Nursing. In *Weeks 5 and 6*, weekly research questions related to various types of screening programs. These includes, but is not limited to state mandated screening - vision, hearing, scoliosis screening; Height, weight, and BMI (Body Mass Index); dental, scoliosis and Acanthosis Nigricans. In NURS 186 (School Nurse Practicum I), screening programs are also addressed in online discussion. For mandated screening programs, school nurse students are expected to be knowledgeable of and abide by the legal guidelines in the California Education Code regarding screening; the CDE (California Department of Education) (2007) *Standards for Scoliosis Screening in California Schools*; and the CDE (2006) *A Guide for Vision Testing in California Public Schools*. Screening programs is also addressed in the course text, Selekman (2006), *School Nursing: A Comprehensive Text*.

NURS 186 and NURS 187 (Practicum courses) provide the opportunity to participate in planning and conducting various types of screening, both individual and group, at the elementary and secondary level under the direct supervision of a qualified school nurse preceptor. The clinical preceptor determines the competency of the school nurse student in his/her ability to carrying out screening appropriately, interpreting screening results, referring for evaluation and follow up with a parent/guardian.

Candidate Competency in carrying out mandatory screening and other types of screening is evaluated by the clinical instructor through student journaling and by the preceptor:

See Sec. 3 (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklist #E1 (elementary) and #S2 (secondary). Preceptor must initial each skill/competency and sign the Preceptor Checklist indicating that all competencies have been met at the end of semester.

State mandated immunization programs:

Candidates gain insight into immunization programs for control of preventable communicable diseases:

NURS 184, Introduction to School Nursing. Mandatory immunizations for school aged children are covered in weekly research questions in *Week 5*, i.e., disease prevention through

immunization, preschool and kindergarten entry requirements, etc. Immunization requirements for school aged children are also included in online discussion in NURS 186 (School Nurse Practicum I). School nurse students are expected to follow the immunization guidelines in the CDHS (California Department of Health Services), Immunization Branch (2003) *California Immunization Booklet* which is provided to students on entering NURS 184, Introduction to School Nursing. Immunization requirement for school age children on the national level are also covered in course text, Selekman (2005) *School Nursing: A comprehensive Text*, Ch. 21.

In practicum courses (NURS 186 and NURS 187) school nurse students are expected to participate in reviewing immunization documents and “blue” cards to determine if a child’s immunizations are up to date. Students are also expected to review district policy to determine if a child who needs immunizations may be admitted conditionally or needs to be excluded until immunizations are up to date. **Evaluation of screening competency** is determined by the student’s school nurse preceptor and recorded in the *Preceptor Checklist* (skills) #5 located in the NURS 186/NURS 187 Preceptor Syllabus. The Preceptor must initial the skill indicating that the school nurse student demonstrates competence in carrying out the skill and sign the Preceptor Checklist at the end of the semester.

Candidate Competency in carrying out assessment on pupil immunization status and complete immunization report properly is evaluated by the preceptor:

See Sec. 3 (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklist #E3 (elementary). Preceptor must initial the competency and sign the Preceptor Checklist indicating that all competencies have been met at the end of semester.

Child Health and Disability Prevention Program for children and adolescents:

NURS 184, Introduction to School Nursing. School nurse students gain insight into services for children and adolescent through CHDP program and eligibility guidelines for enrollment through the Gateway Program. This is covered in *Week 5* and included in online discussion in NURS 186 (School Nurse Practicum I). School nurse students are expected to visit the CDHS website for details regarding the program eligibility and services. Students are also expected to have knowledge of the Health & Safety Code sections 124025...124115 as a legal basis for the program.

NURS 186, School Nurse Practicum I, students are expected to review documentation related to CHDP requirement for 1st grade, contact and direct parents to services as necessary, and follow up on compliance.

Candidate Competency in carrying out CHDP assessment on pupils at the first grade level and following reporting guidelines:

This is evaluated by the clinical instructor through student journaling and by the preceptor through observation.

See Sec. 3, p. 396, N186/N187 Preceptor Syllabus competency checklist #E4 (elementary). Preceptor must initial the competency and sign the Preceptor Checklist indicating all competencies have been met at the end of semester.

Health education and health promotion:

Students gain knowledge of the importance and scope of primary intervention in phase I and Phase II seminar courses and incorporate that knowledge into health teaching and health promotion in practicum courses:

NURS 137, Teaching Perspectives for the Healthcare Client (3). In this phase I course, school nurse students are equipped with insight into the principles of teaching and learning related to teaching individuals and small groups and how it can be applied in the school setting.

In NURS 186 and NURS 187 (practicum courses), health teaching and health promotion opportunities in clinical practice: At both the elementary level in the fall and secondary level in the spring school nurse students have ample opportunity for “**teachable moments**” with pupils, faculty, and staff visits in the health office (80 practicum hours at each level for practicing school nurses; 120 hours for school nurse student not currently practicing school nursing).

In NURS 186 (elementary practicum), students have the opportunity to choose a **health teaching assignment** that is taught in classroom room setting. The school nurse student chooses the subject matter based on age appropriate content and the learner readiness guidelines in CDE (2003) *Health Framework for California Schools: Kindergarten through Grade Twelve*; and the CDE (2009) *Health Education Content Standards for California Schools: Kindergarten through Grade Twelve*.

Candidate competence in teaching a health lesson in the classroom:

This is evaluated by the student's clinical instructor through written assignment and student journaling; and by the preceptor observation, feedback from the classroom teacher, self-evaluation by the student; and a candidate prepared pre-post test of pupil knowledge regarding material covered. To contribute to the learning experience among classmates, students share their teaching experience and outlines on the Blackboard Discussion Board to enhance learning experience for classmates.

See Sec. 3 (p. 396 and p. 401), N186/N187 Preceptor Syllabus checklist # E5 (elementary) and #S3 (secondary).

*In NURS 187, (secondary), students have the opportunity to choose to do a **Health Education Curriculum Paper and Teach**, which involves collaboration with a teacher and developing curriculum that can be added to existing curriculum at the secondary level and to then the student must teach the health lesson; or a **Aggregate Teaching/Small Group Activity**, which includes facilitating meetings with a small group of pupils to discuss health related issues. If the Aggregate Teaching/Small Group Activity is selected, the student must incorporate the Group Process. School nurse students are expected to choose an appropriate learning theory. If the Aggregate Teaching/Small Group Activity is selected, the student must incorporate the Group Process. The subject matter based on age appropriate content and learner readiness guidelines in CDE (2003) *Health Framework for California Schools: Kindergarten through Grade Twelve*; and the CDE (2009) *Health Education Content Standards for California Schools: Kindergarten through Grade Twelve*.*

Candidate competence in developing age appropriate curriculum, carrying out a classroom teach or facilitating a small group:

This is evaluated by the student's clinical instructor through student journaling and completion of a written assignment; and by the preceptor, through observation, feedback from the classroom teacher, self-evaluation by the student; and a pre-post written assessment of pupil knowledge of material covered. To contribute to the learning experience among classmates, students share their teaching experience and teaching outlines with classmates on the Blackboard Discussion Board to enhance the learning experience for classmates as well. See **Sec. 3** (p. 396 and p. 401), N186/N187 Preceptor Syllabus checklists # E5 (elementary) and S3 (secondary).

An Experienced School Nurse Project related to primary level intervention. *In NURS 186 and NURS 187 (practicum courses)* school nurse students with two or more years of school nursing

experience, specific to the educational level in which they are taking their current practicum, may use up to 20 hours of clinical time working on a project that would be meaningful to school nursing or the school community. The project could relate to primary prevention, i.e., the development of a health screening program or a health promotion program within the school setting which may involve collaboration with other members of the education team and/or the community. Students who are interested in completing a project must first write a proposal detailing the type of project he/she is interested in pursuing. The project must be approved by the student's preceptor and clinical supervisor. The student must journal on progress made with the project and must submit an electronic copy of the project, or a complete outline detailing the project and its outcome.

Quality and usefulness of project is evaluated:

The proposal must be approved by the student's clinical instructor and preceptor as benefiting school nursing and/or the school community. The student's preceptor and clinical instructor also review and evaluate the final project. Points are assigned based on the quality and completeness of the project.

See Sec. 3 (NURS 186/NURS 187 Preceptor Syllabus (p. 367), N186 (p. 199) and N187 (p. 328) Syllabi for Exp. School Nurse Project.

Candidates understand how to facilitate access to appropriate affordable healthcare beyond the school setting:

In core school nurse courses, both seminar and practicum courses, candidates gain insight into community resources specific to various health needs of students and how to assist children, adolescents and families in accessing affordable and appropriate healthcare for specific health related problems, i.e., dental, medical, mental health services, or resources for basic needs such as food, clothing and shelter. In seminar courses, NURS 184 (elementary) and NURS 185 (secondary), candidates respond to weekly questions specific to various types of health conditions that require identifying referral agencies and other resources in the community. In NURS 184, Child Health and Disability Prevention services for children and adolescents are covered, along with coordinated school health programs and community collaboration, appropriate referral for specific acute and chronic health conditions, and various medical emergencies. In NURS 185, coordinated school health programs are again covered at the secondary level, as well as community and family involvement in accessing healthcare; helping the uninsured adolescent access services; sources of treatment for substance abuse, sexually transmitted diseases, pregnancy, psychiatric issues, family and date violence, issues with sexual orientation, depression, suicide prevention, athletic injuries.

In online classroom discussion in practicum courses (NURS 186 and NURS 187) school nurse students discuss various health conditions and share information on community resources. In completing practicum hours, candidates carry out assessments on children and adolescents with various health complaints that lead to the need to refer for services. This is accomplished with direction from the student's school nurse preceptor to appropriate community resources. Candidates in practicum courses gain insight into the multifaceted problems associated with low income families, migrants, and families of various cultural backgrounds and how to help them gain access appropriate and reasonable care.

Candidate competence in assisting children, adolescents, and families to access healthcare and other community resources:

This is evaluated by the clinical instructor through student journaling, student conferences, and input from preceptor. **See Sec. 3** (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklists #E6 (elementary) and #S4 (secondary). The preceptor must initial the competency as being done and sign the checklist indicating that all competencies have been met at the end of semester.

See also Sec. 3 (p. 407) Preceptor Evaluation of Student Professional Dispositions #5, "Candidate demonstrates a COLLABORATIVE disposition."

Candidates understand how to identify available community health resources in assisting with access to care:

Candidates entering the program are not required to hold a Public Health Nursing certificate, though they are required to have taken community health course work (both didactic and field experience) through an accredited university. This requirement gives school nurses the global understanding for community health issues and insight into the various resources that is necessary in order to effectively assist children, adolescents, and families with acquiring the necessary services, i.e., programs and services through a local health department, Social Services, family planning services, as well as food, clothing and shelter.

In NURS 186 fall – (elementary school nursing) and in NURS 187 (spring – secondary school nursing) with guidance and approval from the student's school nurse preceptor, candidates are expected to spend at least 6-8 hours in the community, visiting community agencies and becoming familiar with other types of community services relevant to that particular semester. Candidates also gain insight into community agencies and other community resources through spending time under the direct supervision of an experience school nurse preceptor.

Candidate knowledge of community resources, as well as their ability to refer children, adolescents, and families to appropriate services:

This is evaluated by the clinical instructor through student journaling and the preceptor. **See Sec. 3** (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklists #E6 (elementary), and #S4 (secondary). The preceptor must initial the competency and sign the checklist verifying that all competencies have been met at the end of semester. See also Preceptor Evaluation of Student Professional Dispositions #5.

Candidates understand how to promote environments health and safety in the school setting:

The importance of environmental safety and keeping pupils safe in school is stressed in core school nurse coursework and practicum experiences. In NURS 184, Introduction to School Nursing, candidates respond to research questions specific to the role of the school nurse in identifying unsafe playground conditions; collaborating with Food Services, teachers and other school personnel to keep pupils with severe food allergies safe in school; training unlicensed personnel to safely assist pupils with taking medication and carry out allowable procedures; the role of the school nurse in identifying bullying and keeping victims of bullying safe; emergency first aid and preparing school personnel to cope with health related emergencies; and developing emergency action plans for individual pupils. In NURS 185, School Nurse Seminar, the following is addressed: coping with sports emergencies and first aid at the secondary level; *Week 11* is devoted to the role of the school nurse in keeping schools safe; participation in planning for disaster preparedness and the role of the school nurse, suicide prevention and intervention, other types of crisis intervention and post-vention, collaboration efforts in planning and preparing for natural disasters, campus intruders, gang awareness issues; victimization and threats to pupils, Crisis Response Box and Partners for Safe Schools. In practicum courses school nurse students are expected to learn about the role of the school nurse and safety issues on the schools in which they take their practicum.

In practicum courses (NURS186 and NURS 187), candidates must demonstrate their understanding and awareness for campus security threats, i.e. identifying gang activity, recognize victimization, and other threats such as intruders on campus. They must be able to discuss action steps to cope with individual emergencies; express knowledge of and insight into school wide action plans related to natural disasters and other school wide emergencies with understanding for the role of the school nurse. Candidates must demonstrate their ability to collaborate with teachers, staff, and parents in the development of emergency action plans for individual pupils with life threaten allergies or other health conditions; and to take the proper actions steps with pupils where there is a treat of suicide or endangerment of others, which includes effectively communication with administrators and proper authorities. Candidates must participate in properly training and supervising unlicensed school personnel who provide emergency first aid

and assist pupils in taking medication in the absence of the nurse and/or carry out allowable specialized physical healthcare procedures. School nurse students must demonstrate their ability to use Standardized Precautions, and to train others to do so in prevention of spread of disease.

Candidate knowledge and ability to promote environmental health and safety in the school setting:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p.401), N186/N187 Preceptor Syllabus competency checklists E7, E8, E9, E10 (elementary); S5, S6, S7 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates understand how to exercise leadership as necessary with collaborative agencies within the community:

While under the supervision of a school nurse preceptor, candidates take leadership responsibility in by getting involved in referring children, adolescents, and families to various community agencies for services, i.e., CHDP programs, immunizations, identified health problems, failed mandated screening and other types of screening, i.e. dental. Working with their preceptor, school nurse students can take leadership responsibility in program development. Candidates are required to spend 6-8 hours each semester investigating community resources and being involved in community activities. During this time they are expected to demonstrate assertiveness and leadership in contacting directors of community programs and agencies in order to interview them about service offerings and to establish meaningful connections that will aid them in assisting children, adolescents, and families. A realistic example of leadership is which the candidate becomes aware of a communicable disease outbreak at a school site, in which case, under the watchful eye of a preceptor, the school nurse student is expected to demonstrate leadership ability by responsibility to contact the appropriate community agency(s) in order to begin the process of work together to resolve the problem. Another example of a leadership activity that involves community agencies would be the school nurse student who chooses as a special project to develop a health fair at a school site, which involves creating a survey to determine health education needs within the school community, contacting community agencies, and coordinating the event. Health fairs are addressed in NURS 185 (School Nurse Seminar). In both NURS 184 and NURS 185 (seminar courses), coordinated school health programs are discussed at length. Through understanding what is involved in a comprehensive school health program and involved in coordinating different aspect of a program, candidates learn about the importance of collaborating efforts with community agencies in order to bring about more global and seamless services for children, adolescents, and families. In NURS 186 and NURS 187 (practicum courses), candidates demonstrate leadership in this area by becoming involved in the process as the only health authority at that school site who bring with his/her

expertise to the planning table. Again, school nurse students frequently choose to participate in the development of a coordinated school health program as a special project. In practicum courses, While under the supervision of a school nurse preceptor, candidates take leadership responsibility in by getting involved in referring children, adolescents, and families for various community agency services, i.e., CHDP programs, immunizations, for various identified health problems, failure of mandated screening and other types of screening, i.e. dental.

Candidate ability to exercise leadership in collaborating with agencies within the community:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401) N186/N187 Preceptor Syllabus Competency Checklist #E6 (elementary) and #S10 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates understand how to promote healthy nutrition for students and staff:

In NURS 184 (Introduction to school nursing): The importance of a healthy life style, which includes a well rounded diet and exercise if discussed. In *Week 6*, there is a research question that related to the school nurse role in health assessment of elementary school aged children, which includes measuring heights, weights, and body mass index to determine nutritional intake and involvement in exercise. There is also a question related to the role of the school nurse in preparing to teach a lesson to 4th – 6th grade pupils about living a healthy lifestyle, which includes understanding the importance of a healthy nutritional intake. In *Week 7*, a research question relates to the role of school nutritional services in providing balanced meals for students, as well as the role of the school nurse in coordinating awareness for good nutrition into other aspects of the pupil's educational experience. In *Week 10*, Candidates may choose to write a proposal for a school site program that would help overweight pre-adolescent girls live a healthier lifestyle. Candidates are made aware that school nurses need to model a healthy lifestyle in order to effectively encourage students and staff to follow suit. Health promotion for school faculty and staff is also addressed in this same week. In NURS 185 (School Nurse Seminar), *Week 5*, nutritional requirements for male and female athletes, is covered with comparison to non-sports participants. This also includes discussion on nutritional needs that differ with different types of sports, unhealthy eating behaviors related to the desire to lose or gain weight in order to participate in a particular sport. In *Week 9*, identifying eating disorder and the role of the school nurse is covered. In practicum courses (NURS 186 and NURS 187) candidates are expected to discuss nutritional intake when a child or adolescent who presents in the health office with a health complaint. Candidates are also expected to include a nutritional assessment when evaluating pupils for placement in special programs. Frequently candidates select healthy nutrition as a topic for a health teach at the elementary level or in facilitating a small group of pregnant teens at the secondary level. School nurse preceptors inform candidates

of ways to promote a healthy lifestyle through decorated bulletin boards, available pamphlets in health offices, as a resource and health educator for faculty and pupils. Candidates are also made aware that they must model a healthy lifestyle in order to encourage others.

Candidate ability to promote the need for healthy nutritional for students and staff:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklists #E13 (elementary) and #S11 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates understand how to participate in providing coordinated health services and school health programs to better manage limited resources:

Candidates gain insight into the value of collaborating efforts to bring about more seamless programs and services to pupils and others in the school community. In NURS 184, *Week 2*, candidates are introduced to the eight components of a comprehensive school health program and the importance of coordinating programs and services that lead to better services and better use of limited resources. School nurse students learn about the steps involved in the development a coordinated health program, such as the need for effective leadership, funding sources, buy-in by invited participants and the role of the school nurse. This insight helps candidates understand how departments within the school building and community agencies can work together towards a common goal. In *Week 7*, candidates learn about the School Health Index and how it fits with a coordinated school health model. In *Week 10*, candidates learn about the role that health education plays as one of the eight components in a comprehensive school health program; they also learn how school, family, and community can work together to strengthen student success in school. In NURS 185, in *Week 2*, candidates learn about coordinated school health programs at the secondary level and community involvement. In *Week 3*, learn about health promotion and disease prevention through coordinated programs; they gain insight into funding sources; and learn how to plan and pulling together a health faire at a school site, which involves developing a survey to determine interest, contacting the various community agencies and programs, and coordinating it to fit into teacher and pupil schedules. In *Week 12*, candidates learn about school based health centers and the importance of collaboration in establishing partnerships. In *Week 15*, candidates gain insight into the concept of a school nurse community. In practicum courses (NURS 186 and NURS 187), Candidates spend time observing and participating in coordinated school health services and programs with their school nurse preceptor. They gain first hand insight into the value of collaboration and partnerships. Experienced school nurse students frequently choose to do a project that involves them as a member of a planning team working on a new program.

Candidate knowledge and participation in coordinated health services and programs:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), N186/N187 Preceptor Syllabus competency checklists #E11 (elementary) and #S13 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates understand how to organize and implement the overall school health program:

Before students can learn to organize and implement a school health program, they must understand the legal guidelines on which school nurse practice is based - In NURS 184, Introduction to School Nursing, students learn that the role of the school nurse is to support student learning through implementing strategies that promote student and staff health and safety. To accomplish this, students gain insight into legal guidelines: such as the *California Ed Code*, district policies, National Association of School Nurses/American Nurses Association (2005) *School Nursing: Scope and Standards of Practice*, the *CA Nursing Practice Act*. Students learn that CSNO (California School Nurses Organization) and NASN (National Association of School Nurses) position statements strengthen and validate their school nursing practice. Legal guidelines are referred to throughout NURS 184 and NURS 185 (seminar courses), beginning in NURS 184 in week one. In practicum courses students use those legal guidelines in their school nursing practice, i.e., in training, assisting, directing, teaching children, adolescents, families, faculty and staff; and in planning to teach in the classroom (i.e. Family Life Education), in writing policy/procedure papers and in other assignments.

In NURS 184, *Introduction to School Nursing*, candidates gain insight into the role of the school nurse as it relates to the following: Overview of comprehensive school health programs; coordinated school health programs; framework of school nurse; health offices management and record keeping; organizing a school health program (administrative perspective); management process; dimensions of school nursing; state mandated screening requirements and programs; other programs – dental, nutrition, migrant; management of clients with acute and chronic diseases; policies and programs in the management and prevention of communicable disease and immunization requirements; school environmental safety; emergencies action plans; health promotion programs for pupils, faculty and staff; teaching in the classroom; working with dysfunctional families, homelessness, and those of a different ethnic group/cultural; guidelines on child abuse reporting; school nurse involvement as members of the education team, meeting the needs of individuals with disabilities (504); special education and the IEP (Individual Education Plan) process; community resources and programs; insight into helping relationships.

In Nursing 185, School Nurse Seminar, candidates gain insight into the role of the school nurse in the following areas: Comprehensive school health programs at that the secondary level; interdisciplinary involvement, working with other members of the education team at the secondary level in planning, implementing coordinating school health programs involving other departments; health promotion programs for pupils, faculty and staff; enlisting community participation in health promotion, i.e., health fairs; adolescent health preventive services, i.e., substance abuse, communicable disease; child abuse reporting, including unlawful sexual activity; programs for pregnant and parenting teens; assisting pupils with acute and chronic health problems; emergency action plans; mental health issues such as eating disorders, depression and suicide; participation as a member of the crisis intervention team; involvement in campus safety and violence prevention programs, the role of the school nurse in school based clinics; funding sources and grant writing; Medi-Cal billing and reinvestment of funds; use of technology; quality assurance in school nursing and health services; school nurse visibility; and continuing education and the importance of staying connected with school nurse professional organizations.

NURS 186 and NURS 187 (practicum courses) journal questions related to locating the job description for the school nurse and determining its relevancy and currency; gaining insight into organizing the school nurse's school year, through speaking with the candidate's preceptor and to compare/contrast the preceptor's organizational skills with their own method of planning and time management; learning about school district funding sources and budget issues, ordering supplies, and billable health services; school ethnic breakdown and health issues relevant to different ethnic groups, etc. Online class discussion in practicum courses centers around current issues in school nursing practice, sharing and problem solving in clinical practice.

Candidate insight into, and understanding of, ways to organize and implement the overall school health program:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E18 (elementary) and #S14 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates understand how to promote the oral health of students:

In NURS 186 and NURS 187 (practicum courses), while working with a school nurse preceptor, candidates become aware of the extent and seriousness of poor dental health and presence of dental decays among school aged children, particularly children from low income families, whose parents are unaware of available services or who prioritize other survival needs above dental care. Candidates are expected to get involved in promoting the oral health of students

through getting involved in scheduled dental screening programs at specific grade levels, and in taking the opportunity for “teachable moments” while completing health assessments on children referred for evaluation by teachers and others in the school community. In NURS 184, candidates learn about community and state programs such as CHDP (Child Health and Disability Prevention) program, the Gateway Program, Medi-Cal for qualifying families; and CA Healthy Families, which provides health and dental care for those children and teens who do not qualify for Medi-Cal. In NURS 184, *Week 7*, candidates have an opportunity to respond to a research question that asks the candidate to describe the steps involved in developing a dental hygiene program at a school site which involved collaboration with community resources. Candidates frequently choose promoting oral hygiene as subject matter for their classroom health teaching experience. Students are also expected have insight into Education Code section 49452.8, which states that kindergartners, or first grade pupils if not screened previously, shall present proof of having received an oral health assessment by a licensed dentist no later than May 31st of the school year. Though funds will not be forth coming to school in 2009 to cover cost due to the state budget crisis, candidates are still made aware of the need to urging parents to follow through with this important oral hygiene assessment.

Candidate understanding for how to promote the oral health of students:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklist #E14 (elementary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criteria 2: Candidates promote mental health of students and staff and are alert to potential situations of child abuse and/or neglect and report such situations appropriately; and also recognize signs and symptoms of potential substance use and abuse and make appropriate referrals.

Candidates promote mental health of students and staff:

Candidates in the program gain insight into a myriad of health related issues, external and internal environmental stressors that threaten a client’s stability, both for school age children, adolescents, and school staff. In NURS 184, Introduction to School Nursing, the following is covered: in *Week 1*, stress related to a new school nurse job and lack of preparation; In *Week 4*, sensitivity to an employee’s need for appreciation that leads to job satisfaction; in *Week 11*, insight into the role of the school nurse in helping children and families find coping skills with regard to anxiety disorders, i.e., school phobias, and various behavioral issues that threaten a child’s success in school; in *Week 13*, the families and the grief process is as it relates to parents

with special needs children is addressed. In NURS 185, School Nurse Seminar, the following is covered as it relates to the role of the school nurse as it related to strengthening lines of defense and coping skills for clients: *Week 1*, preadolescent stress transitioning from elementary to the middle school; risky adolescent behaviors that threaten learning; teacher stress and coping at the secondary level; *Week 3*, school nurse health promotion and education related to substance abuse prevention and cessation programs. *Weeks 8, 9, 10, and 11*, the school nurse role in health promotion through health teaching, counseling and referral for pregnant and parenting teens, helping adolescents cope with stressors that lead to mental health problems, i.e., depression; anxiety disorders, eating disorders; concerns about sexual orientation, anger management, threatened suicide, and various other types of violence toward self and others. In NURS 185, candidates are asked to write a research paper in an adolescent mental health issue or behavior issue that threatens school success. This assignment gives candidates insight into the role of the school nurse in counseling and health promotion for these adolescents. In practicum courses (NURS 186 and NURS 187), students gain first-hand experience in promoting mental health in the school setting through working under the direct supervision of a qualified school nurse preceptor at the elementary and secondary levels, where they have the opportunity to assess, counsel, and encourage school aged children and adolescents who are referred by teachers and other members of the school community. They also have the opportunity to promote mental health among adult members of the school community through bulletin boards, newsletter, listening, teaching, encouraging, and referring if appropriate.

Candidates are alert to potential situations of child abuse and/or neglect and report such situations appropriately:

In NURS 184, Introduction to School Nursing, in *Week 11*, child abuse identification and reporting guidelines is covered. The candidate learns who the responsible party is with regard to reporting and the role of the school nurse in teaching staff to observe to signs of child abuse and neglect. Candidates are also expected to know about P.L. 104-235 and codes that apply. In NURS 185, *Week 7*, school nurse students are expected to know the legal guidelines that relate reportable sexual abuse between an adult and a minor, as well as effective counseling techniques to help frightened minors who may be victims. In *Week 9*, candidates also learn about family and date violence and community resources. In practicum courses (NURS 186 and NURS 187), while participating in their practicum experiences at the elementary and secondary level, candidates are expected to be alert to signs of child abuse and/or neglect, as well as other forms of abuse at the secondary level.

The candidate alertness to potential situations of child abuse and/or neglect:

This is evaluated by the clinical instructor through student journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E15 (elementary) and S16 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Candidates recognize signs and symptoms of potential substance use and abuse and make appropriate referrals:

In NURS 185, School Nurse Seminar, which covers adolescent health issues, Week 6 is dedicated to issues related to substance abuse. Candidates are asked to identify different types of illegal substances, street names, trends and statistics in substance abuse; and to gain insight into reasons why preadolescents and adolescent may begin to experiment with and become dependent on various types of illegal substances, i.e., party drugs, street drugs, prescription drugs, alcohol, cigarettes, and other types of dangerous inhalants. Candidates learn about key components in prevention program curricula; effective and ineffective strategies that work. During this week, candidates also learn about performance drugs that athletes may use. In NURS 187, School Nurse Practicum II, candidates are expected to be alert to signs and symptoms of substance abuse as they carry out assessments of secondary students who visit the health office. When substance abuse is suspected, candidates are equipped through acquired counseling skills (COUN 174 or 200), health assessment, and appropriate history taking, to make an informed decision as to how the situation should be handled. Candidates also gain insight into the need to collaborate with other school personnel and law enforcement in these matters. With insight from their school nurse preceptor and through time spent in the community at the secondary level gaining insight into various types of programs, candidates are expected to make appropriate referrals that will help substance abusers overcome the addiction and resolve the issues that lead to the abuse. Candidates also gain insight into programs that help families members cope with the situation.

The candidate ability to recognize signs and symptoms of potential substance abuse and make appropriate referrals:

This is evaluated by the clinical instructor through journaling and by the preceptor. **See Sec. 3** (p. 401), Preceptor Syllabus checklist #S17 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 3: Candidates are alert to issues of student attendance and intervene appropriately to promote student attendance:

In NURS 184, Introduction to School Nursing, week 11, there is a cluster of questions that deal with issues related to school refusal and health related absenteeism. Candidates are asked to define school phobia and discuss the basis for this fear. They are also asked to compare factors related to delinquency with those of school phobia, including the role of the school nurse in assessment, intervention and prevention for each. In NURS 186 (practicum course), in week 9-12, candidates are asked to respond to a journal question to discuss the SARB process (School Attendance Review Board) with their preceptor. They are also asked to become familiar with CA Ed. Code section 48320-48325 related to absenteeism and the SARB process, as well as their school district policy on attendance and referral to SARB. Candidates are also expected to be able to explain their district's policy and steps to improving student attendance as it relates to the role of the school nurse in the process. Candidates are encouraged to attend at least one SARB meeting as a community outreach activities in at least one of their practicum courses. They are expected to journal on their SARB meeting experience, which is frequently report it as eye opener. While working with their school nurse preceptor, candidates gain insight into the importance of early intervention and follow-up on absenteeism.

The candidate ability to alert to issues related to student attendance and to intervene appropriately to promote student attendance:

This is evaluated by the clinical instructor through journaling and by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E16 (elementary) and S18 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

School Nurse Competencies 2

SNC 2: Providing direct client care services (Secondary and Tertiary Level Interventions).

Criterion 1: Candidates for a School Nurse Services Credential demonstrate the ability to provide healthcare services to students and emergency and/or first aid assistance to others in the school setting:

In NURS 186 and NURS 187 (practicum courses) candidates demonstrate the ability to provide healthcare services to students and carry out emergency care and other types of first aid during the required hours that must be spend working under the direct supervision of a qualified school nurse preceptor away from the candidates own school site (if currently practicing school nursing).

There are a total of 135 hours in each of the two practicum experiences (elementary in the fall and secondary in the spring). For each semester, 12 of those hours is devoted to class discussion related to clinical practice and three hours are set aside for conferencing with the student's clinical instructor. For the school nurse student who is not practicing school nursing, 120 hours must be spent in clinical practice and in related activities, i.e., time spent in the community gaining insight into referral agencies and other community services and attendance at school nurse in-services. Forty hours credit is given to practicing school nurse students, however, these candidates must spend 80 hours in clinical practice and other related activities. That leaves a core of time, 100 hours for non-practicing students and 60 hours for students employed as school nurses, which must be spent under the watchful eye of a qualified school nurse preceptor who is responsible for evaluating the candidate's clinical competence.

The candidate demonstrates the ability to provide healthcare services to students and emergency and/or assistance to others in the school setting.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E20, #E21, #E22 (elementary), and #S19, #S20, #S21 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 2: Candidates understand how to manage the acute and chronic healthcare of all students, including those who are medically fragile, such as students with spina bifida, cerebral palsy, and/or muscular dystrophy.

Candidates take what they have been taught in seminar courses and apply what they have learned in seminars in practicum courses under the supervision of a qualified school nurse preceptor, while spending time working with the regular elementary and secondary school population, as well as time spent working directly with the medically fragile and those students requiring special physical healthcare procedures. In seminar courses student learn about the various acute and chronic health conditions associated with the school population, including meeting the healthcare needs of the medically fragile. In *NURS 184 (Introduction to School Nursing - elementary)*, the following insight is gained into caring for students with acute and chronic health conditions: In *Week 8*, acute and chronic healthcare conditions among school age children and related emergency management. In *Week 9*, candidates learn how to write individual healthcare plans and emergency care plans to meet the needs of these students. In *Week 11*, candidates gain insight into anxiety disorders, Tourette Syndrome, autism, school phobias, etc. In *Week 12*, severe allergies and allergic reactions is covered; and in *Week 15*, the care of the medically fragile students and special physical healthcare procedures are covered. In *NURS 185 (School Nurse Seminar - secondary)* the following is covered: In *Week 5*, the role of the school nurse in managing sports injuries; in *Week 6*, counseling and referral of students involved with substance abuse; *Week 7*, sexually transmitted diseases; *Week 8*, teen pregnancy; *Weeks 9 and 10*, adolescent mental health issues, i.e., anxiety, self injury, eating disorders, etc.

The candidate demonstrates the ability to manage the acute and chronic healthcare of all students, including those who are medically fragile, such as students with spina bifida, cerebral palsy, and/or muscular dystrophy:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3**, (p. 396 and p. 401), Preceptor Syllabus checklists #E21 through #E26 (elementary), and #S20 through #S25 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 3: Candidates understand the case management process, and can appropriately apply that process in the school setting.

Candidates gain insight into the school nurse role specific to the five case management activities – assessment, planning, linking, monitoring, and advocacy, as these relate to meeting the multifaceted health related needs of children, adolescents, and families. While participating in a clinical experience with a qualified school nurse preceptor, candidates are exposed to a variety of children and adolescents with complex health related needs, including those of the family, which

involves using the Nursing Process and linking care and addressing unmet needs with other professionals within the school and community in order to bring the various components together to achieve a successful outcome. In NURS 185, School Nurse Seminar, candidates have the opportunity of responding to a question about Targeted Case Management as a LEA billing option, who qualifies for services, and the role of the school nurse.

The candidate demonstrates an understanding for the case management process, and demonstrates the ability to apply that process in the school setting.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E28 (elementary), and #S27 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 4: Candidates understand the process of identifying and responding to the potential spread of communicable disease, and also apply appropriate preventive measures.

In seminar courses (NURS 184 and NURS 185), candidates gain insight into the role of the school nurse in controlling the spread of communicable disease in the school setting. They also must become familiar with sections of the Education Code related to the role of the school nurse in communicable disease control, as well as mandated teaching at the secondary level aimed at HIV/AIDS prevention. In NURS 184, Week 5, school nurse students learn about the required state mandate immunizations that students must have in order to enter and remain in school; in Week 8, control of the spread of communicable disease in general is covered, including the control of Pediculosis; in Week 15, universal precautions and control of communicable disease as it relates to medically fragile students is covered. In NURS 185, Week 7, sexually transmitted diseases are covered. In practicum courses (NURS 186 and NURS 187) candidates discuss the role of the school nurse in preventing the spread of communicable disease and flu, including steps to take in setting up clinics at school sites to provide vaccine and/or to skin test in the event of exposure to tuberculosis. By being expected to become familiar with district Policy and Procedure Manuals, candidates learn about exclusion and re-entry policies related to students who are sent home with suspected communicable disease symptoms, this includes policies related to Pediculosis. Working with a qualified school nurse preceptor and attending to children and adolescents visiting the health office, candidates gain experience in observing for signs of communicable disease. With adolescents, candidates have the opportunity to use their counseling skills gained in COUN 174 or 200, in determining a possible exposure to a sexually transmitted disease, other. Candidates are expected to have access to a current communicable disease manual as a reference source and must spend time in the community gaining insight into appropriate referral agencies.

Candidates express an understanding for the process of identifying and responding to the potential spread of communicable disease, and demonstrate appropriate preventive measures.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 395 and p. 400), Preceptor Syllabus checklists #E3, #E10, #E27 (elementary), and #S26 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 5: Candidate can effectively manage and implement health screening programs and procedures.

Prior to entering core school nurse courses, candidates are expected to take a vision and scoliosis screening course that prepares them to carry out screening in their practicum course. They also must complete CSSD 125, Audiometry for School Nurses, as a prerequisite to practicum courses. In NURS 184, Week 6, candidates learn about the role of the school nurse as it pertains to conducting various state mandated screening programs and other types of screening programs. Candidates are expected to gain insight into ways to plan, organize and carry out state mandated vision, hearing, and scoliosis screening and to cite appropriate sections of the CA Ed. Code related to qualifications of screeners, screening techniques, referral guidelines, tools, care of equipment, and recommended grade levels. Candidates also learn about methods for screening individual children, students with special needs (which may includes carrying out functional hearing and vision tests), classrooms, and entire schools as a member of a screening team. Candidates are expected to know what the California Code of Regulations Title 5, 3028 has to say about guidelines for screening students in Special Education. Candidates learn about the value of doing heights, weight, and body mass index on children to determine the need for other programs aimed at encouraging a healthy life style through proper nutrition and exercise. Candidates learn to value the need to screening students for Acanthosis Nigricans which is associated with insulin resistance. In NURS 186 and NURS 187, candidates participate in discussing various aspects of their clinical experience, one of which is sharing ways to plan, organize and conduct school wide screening and screening students with special needs. During their practicum experience, candidates spend quality time with their school nurse preceptors participating in hands-on state mandated screening and other types of screening. Candidates are expected to do more than just test distance vision, they are also expected to carry out other various vision screening procedures as the need arises, as well as to conduct threshold hearing tests on students who fail hearing screening.

Candidates demonstrate effective management and implementation of various screening programs and procedures.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 395 and p. 400), Preceptor Syllabus checklists #E1 (elementary), and #S2 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 6: Candidates assess and appropriately manage acute injuries that occur in the school setting.

All candidates must hold in their possession a current First Aid and CPR card prior to beginning practicum courses. In NURS 184, Introduction to School Nursing, *Week 8*, candidates learn about the need to be prepared to respond to any type of health-related emergency. In one question asks the candidate to outline the assessment and first aid steps that the school nurse needs to take to manage various traumatic injuries, i.e., a head injury, eye injury, avulsion of a permanent tooth, a compound fracture, chemical burn, an ankle sprain. In quality time spent in the health office with a experienced school nurse preceptor, candidates have the opportunity to assess a variety of injuries that present in the health office. This includes assessing injuries that occur on the playground and P.E. injuries that occur in the field or in the gymnasium.

Candidates demonstrate the ability to assess and appropriately manage acute injuries in the school setting:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E21, #E22, #E23 (elementary), and #S19, #S20 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 7: Candidates appropriately store, manage, and dispense medications to students, and appropriately document medication administration within the school setting.

In NURS 184, Introduction to School Nursing, *Week 5*, the role of the school nurse in training UAPs (unlicensed assistive personnel) is addressed, including who is allowed to “administer” medication and who may “assist” students in taking medication. Guidelines related to administration of emergency medication, and those specific medications are also covered. Candidates are expected to have knowledge of the section of the Education Code that allows

students to take medication at school, as well as the Nurse Practice Act which does not allow school nurses to training UAPs to administer routine medications. In practicum courses (NURS 186 and NURS 187), candidates spend quality time with their experienced school nurse preceptor gaining insight into appropriate and safe methods to store, managing, and dispense medications to students, including documentation and administration in the school setting. Candidates are reminded of the five rights of giving medication and the rule that states “if it isn’t documented, it isn’t done. During online class discussion in the practicum courses, concerns about training UAPs, safety issues, and what is permissible by the California Nurse Practice Act are hot topics for discussion.

Candidates demonstrate their knowledge with regard to storing, managing, and dispensing medications to students, and need to appropriately document medication administration within the school setting.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E29 (elementary), and #S28 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 8: Candidates appropriately identify crisis situations, and provide intervention services.

In seminar courses students spend time learning about crisis situations which they are then able to identify and provide the appropriate intervention services for in their practicum experiences. In NURS 185, *Week 10*, candidates learn about assessing for suicide risk and intervention strategies. They are asked to consider scenarios that may actually take place in the real world. They also learn about suicide prevention programs and the role of the school nurse as a participant on a School Crisis Team. They gain insight into the post-vention role of the school nurse following a completed suicide, i.e. the paper-trail and need for continued follow-up. They also learn who the individuals may be who most often choose suicide as a means of escape. In practicum courses while working with an experienced school nurse preceptor, particularly at the secondary level, candidates have the opportunity to talk and counsel with teens who may demonstrate signs of depression. This is an opportunity for candidates to use the counseling techniques they learned in COUN 174 or 200 in trying to help these students, or others who may be suffering from depression and where there may be a threat of suicide. Candidates also learn when and to whom to report when there is a threat of suicide or threatened harm to others.

Other types of more global crises are covered in NURS 185, *Week 11*. Questions relate to the

following: The CDE “Crisis Response Box: Partnering for Safe Schools,” candidates learn about participating as a member of an interdisciplinary team for the purpose of planning in the event of a crisis. Candidates are asked to describe the three types of emergency crisis and who should be involved at each level, including the role of the school nurse. Candidates learn about participating in the development of an emergency action plan specific their role as the only health professional at a school site. Other questions ask candidates to respond to a scenario in which there is a fire and an explosion, and to discuss the role of the school nurse in triage, or the role of the school nurse in an emergency shelter at his/her school following an earthquake or catastrophic fire; to discuss issues related to the aftermath of a crisis incident that includes timeframe for healing and recall triggers; to discuss the value of collaboration as it relates to school safety and violence prevention; to discuss the prevalence of violence in school, programs, attitudes, warning signs; and gang activity that leads to life threatening violence. In NURS 187 (secondary practicum), candidates are encouraged to interview other professionals at the school site to gain insight into their roles as they relate to threats of violence, i.e. school psychologist, campus police officer, probation officer. Through these interviews candidates learn about gang activity, signs of gang activity, violence, and substance abuse that threaten campus security.

The candidate demonstrates competency in identifying crisis situations, and providing appropriate intervention services.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E30 (elementary), and #S23, #S30 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 9: Candidates identify and address health-related barriers to learning (e.g., food allergies, asthma, diabetes, seizures, headaches, ADHD).

In NURS 184, Introduction to School Nursing, the following health-related barriers to learning are addressed: *Week 5*, food allergies and the role of the school nurse in keeping these children safe, which includes emergency actions plans and coordinating care, collaboration, and cooperation with food services, teachers, and other students. In *Week 7*, the role of the school nurse in screening and finding affordable healthcare for children with dental caries, free or reduced breakfast and lunch for children with nutritional needs, and the complex health related issues specific to migrants and refugees is covered. In *Week 8 and 9*, candidates learn about the role of the school nurse as it relates to helping students with asthma, diabetes I, Sickle Cell disease, ADHD, seizure conditions, severe allergic conditions, and various other health conditions. In *Week 11*, candidates learn about anxiety disorder, such as school phobias and homelessness that keep children out of school, destined for school failure without intervention. In NURS 185, health related issues such as substance abuse (*Week 6*), pregnancy (*Week 8*),

mental health issues related to depression and anxiety disorders (*Week 9*), and fear of injury related to bullying or gang activities which keep students from optimal levels of learning are discussed. In NURS 186 and NURS 187 (practicum courses), working with an experienced school nurse preceptor, candidates gain insight into understanding the need to apply the nursing process which begins with assessment, communication, referral, and ultimately to individual healthcare plans and emergency action plans that keep the child or adolescent at an optimal level of wellness and able to learn. Candidates learn that meeting the healthcare needs of clients frequently involves case management, as it entails coordination of care with physicians, agencies, parents, teachers, other school staff and other professionals.

Candidates demonstrate competence in addressing health-related barriers to learning through use of the Nursing Process and case management skills:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E22, #E23, #E24, #E27 (elementary), and #S21, #S22, #S23, #S24, #S27 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

School Nurse Competencies 3

SNC 3: Professional Management Skills

Criterion 1: Candidates for a School Nurse Services credential demonstrate the ability to use their professional knowledge and skills to promote the overall health of the school community.

Candidates learn that the primary role of the school nurse is to support student learning, and that the school nurse accomplishes this by implementing strategies that promote student and staff health and safety. Candidates learn that promoting the overall health of the school community needs to be done through a well planned coordinated school health program that goes beyond what the school nurse can do alone. To be successful in school nursing, candidate recognizes they must be capable coordinators, collaborators, and good communicators.

In NURS 184, Introduction to School Nursing, candidates learn to promote the overall health of the school community through health promotion and health education, along with modeling a healthy life style. Candidates understand that they must use methods appropriate to the situation and to the client's developmental level, learning needs, readiness, ability to learn, language preference, and culture. Candidates further understand that health teaching must address topics such as healthy lifestyles, risk-reducing behaviors, developmental needs, activities of daily living, and preventive self-care as appropriate to client developmental levels. Required reading for candidates include the CDE (California Department of Education) (2003) *Health Framework for California Public Schools: Kindergarten through Grade Twelve*, and the CDE (2008) *Health Education Content Standards for California Public Schools: Kindergarten through Grade Twelve*. Candidates also learn that the overall health of the school community also involves: controlling the spread of communicable disease through vigorously adhering to immunization admission guidelines; excluding children from school with suspected communicable diseases; protecting the medically fragile students from infectious disease through faithfully following universal precautions; carrying out screening programs to detect deviations from the norm; and encouraging a healthy life style that relates to quality nutrition, exercise, and campaigns to rid campuses of unhealthy vending machines and unsafe playground equipment. Candidates also gain insight into sections of the Education Code that relates specifically to promoting overall health of the school community, i.e., communicable disease control, school nutrition programs, physical education requirements, and health education guidelines in public schools.

In NURS 184, Introduction to School Nursing, *Week 5*, candidates gain insight into immunization requirements, school safety, and safe administration of medications at school; in *Week 6*, candidates gain insight into different types of screening programs to detect deviations from the norm; in *Week 7*, dental programs are covered; in *Week 10*, candidates gain insight into the value of research in determining effective teaching methods, requirements for effective

teaching, and curricula that is appropriate for different learners. They are asked to discuss a conceptual model for effective teaching that relates to learner readiness and the school nurse as educator. Candidates are also asked to discuss health promotion and health education for faculty and staff, and steps that the school nurse can take to plan and implement a school-site health and wellness program for faculty and staff, including the development of a survey to determine health education interests. There are also questions related to teaching and program development, one relates to developing an outline the candidate could actually use to teach a faculty/staff Blood Borne Pathogens in-service to faculty and staff; the another asking the candidate to write a proposal for a health education program promoting a healthy lifestyle for overweight preadolescent girls. In NURS 185 (School Nurse Seminar), candidates have an opportunity to respond to a question that relates to planning and organizing a health faire, an excellent way to bring health awareness to the entire school community.

In NURS 186, School Nurse Practicum I; and in NURS 187, School Nurse Practicum II, candidates have the opportunity to put into practice what they have learned in NURS 184 and NURS 185. For example, they learn first-hand through working with a qualified school nurse preceptor about required immunizations, exclusion policies for noncompliance or communicable disease, screening programs, and observe their preceptor as a coordinator, collaborator, and a communicator working with other school professionals, children, and families. With regard to health teaching and health promotion, in NURS 186 (elementary practicum) there is an assignment that requires candidates to determine a health education need among school aged children; then research the subject matter, develop curriculum and a teaching outline, and to present a health lesson in the classroom. In NURS 187 (secondary practicum), candidates have a choice of collaborating with a secondary teacher to incorporate new curriculum into a health unit and then teach it for the first time; or to facilitate a series of small group discussions on health related issue pertinent to that group. Candidates have the option of participating in a project or a leadership role that may involve health promotion, such as a health faire on a school site (an excellent way to involve the entire community), or an in-service for faculty and staff on Blood Borne Pathogens, or presenting a health update at a faculty meeting. Candidates may also choose as a project to work in developing a wellness program for faculty and staff. Candidates also come to realize that they must model a healthy life style in order to encourage others to do the same.

The candidate demonstrates the ability to use their professional knowledge and skills to promote the overall health of the school community.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E3-5, #E7-8, #E10-14, #E26, #E29, #E31 (elementary), and #S3, #S11-15, #S31 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 2: Candidates advocate appropriately with students, family, community, and others to promote healthy behaviors and lifestyles.

Candidates must complete community health coursework prior to entering the program, as this gives them a global perspective of school nursing as it relates to the surrounding community, since the school population is a reflection of the larger community. Candidates learn that in order to make a difference in the health behaviors and lifestyles of school age children and adolescents, the school nurse must look to both the community and the family for help. Candidates understand that pupils in school, as well as teachers and other members of the school community, must buy into the importance of promoting healthy behaviors and partner with the school nurse to become active participants in health promotion and health education. This understanding is expected to lead the candidate to the realization that the way to accomplish a effective partnership to promote change is through a well planned and coordinated school health program that involves the school nurse, the community, students, and families. In NURS 184, Introduction to School Nursing, *Week 2*, candidates are asked to discuss the eight components of a coordinated school health program and the collaborative steps involved in developing a school health program. In *Week 8*, a question directs candidates to understand that the role of the school nurse cannot be limited to the school building, but must reach out to partners into the community. Another question asks candidates about what is involved in a School Health Index in determining health related needs within the school community. *Week 11* is devoted to the role of the school nurse in health education and health promotion. In NURS 185, School Nurse Seminar, *Week 2*, candidates are asked to respond to a question related to coordinated school health programs at the secondary level.

In NURS 186 and NURS 187 (practicum courses), in class discussion, candidates are asked to discuss the role of the school nurse as advocates with students and parents in achieving a healthier lifestyle. At the secondary level, partnering to advocate for a healthier lifestyle, could mean striving to overcome addiction to substances through partnering with community agencies and programs. Candidates in practicum courses are also required to spent six to eight hours each semester actually out in the community becoming acquainted with relevant community referral agencies, service clubs, and programs that lead to school nurse partnerships in advocating for healthy behaviors and healthier life styles for children and families, i.e., the American Lung Association that can supply the school nurse with health promotional and health education materials to assist with teaching children and adolescents who have asthma, or provide the school nurse with materials in order to developing a smoking cessation program, or providing educational materials to help safety guards students against air pollution. Candidates also recognize other partners within the school who partner with them in advocating for a healthy lifestyle, such as nutrition services and teachers in physical education. Candidates are encouraged to take on a project or leadership role in at least one of their practicum courses which frequently involves planning, organizing, and carrying out a health faire to a school site through

partnering with the school community and community agencies. Candidates are aware of the fact that they must bring parents and families along side as advocates to promote healthy behaviors and lifestyles for their own children, recognizing that without family involvement, there is little chance for change in a child's health habits or nutritional habits. Candidates also come to realize that it is essential that youth need to be involved as partnerships in health promotion and health education, as they have insight into their own problems and can contribute to successful outcomes among peers.

The candidate demonstrates ability to advocate appropriately with students, families, community, and others to promote healthy behaviors and lifestyles.

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus Checklist #E6, #E11, #E13, #E32 (elementary), and #S4, #S9, #S11, #S13, #32 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 3: Candidates use and model evidence-based health care practices in the delivery of school nursing services.

Prior to entering the credential program, candidates were required have taken a course in nursing research, as well as a statistics course, so that they will have an initial appreciation for the importance of research in nursing practice. While in core school nurse courses within the program, candidates come to understand the importance of evidence based practice in school nursing. In NURS 184, *Week 2*, candidates have the opportunity to respond to a question that asks them to discuss the impact that school nursing has on school performance and child well-being and the implications for further research findings to validate school nurse interventions in the educational setting. Candidates learn that evidence-based practice means the conscientious, explicit and judicious use of current best evidence in making decisions about the care for clients, and that school nurses must make an effort to keep abreast of evidence based practice through reading current research articles specifically related to school nursing practice. Within the program, candidates have online access to the National School Nurses Association *Journal of School Nursing* and the American School Health Association *Journal of School Health*. Weekly questions in NURS 184 and NURS 185 require that candidates read current research articles in order to respond to the weekly questions. Candidates learn that school nurses cannot rely on intuition, unsystematic observations, pathophysiologic rationale, in providing appropriate care, but must use research and evidence to guide clinical decision making. Thus, evidence-based practice combines the current research-based evidence with clinical expertise and client preferences to make a decision about approaching the care for a specific child or adolescent. This is carried out in the NURS 186 in the clinical practice experience in that candidates must conduct

a case study in which they are expected to bring these three concepts together in meeting the healthcare needs of the child. There are journal questions in practicum courses in which candidates are asked to find research articles to read that specifically relate to client care in their clinical practice, and to relate how those findings can be applied in specific situations. Importance of research is also stressed in NURS 185, School Nurse Seminar, *Week 13*, where the benefits of research in school nursing are emphasized. Questions that week relate to applying research in school nursing, role of the school nurse in research projects, as well as grant writing and steps to publishing articles and research findings. Candidates in this course are also given the opportunity to do a research paper related to adolescent mental health issues in which they are required to review current research related to the subject matter. Online discussion with regard to evidence based practice also takes place among candidates in practicum courses. While candidates in the post-baccalaureate program are not asked to complete a research project, they are asked to carry out surveys to determine staff/student interest in health education offerings.

The candidate demonstrates the use and models evidence-based health care practice in the delivery of school nursing service:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E33 (elementary), and #S33 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 4: Candidates can communicate effectively in writing and can make clear oral presentations to a wide variety of audiences.

Candidates in the program are expected to use APA format in all assignment work. If APA guidelines are not followed, or if there are typing errors or misspelled words, the paper will be graded down; or if more than six significant typos or misspelling are noted, the paper may be returned and the candidate asked to rewrite the paper. In both NURS 184, Introduction to School Nursing, and NURS 185, School Nurse Seminar, candidates are expected to develop a quality online presentation for classmates, usually a PowerPoint presentation, once during the semester. This is an opportunity for candidates to demonstrate their creative writing skills. Classmates are asked to critique the presentation, which stretches presenters to do their best. Writing skill and correct formatting is also expected clinical journaling in the candidate's clinical experience in NURS 186 and NURS 187. Preceptors are also expected to review the candidate's written communications to parents and other professionals to determine quality and professionalism.

In NURS 187, candidates have an assignment in which they are asked to write a professional newsletter using the appropriate newsletter format, clipart, relevant subject matter, reference sources of information shared, etc. The newsletter must be approved by the candidate's preceptor

and an administrator before it can be sent to the target audience. The newsletter is also turned into the candidate's clinical instructor to be reviewed and points credit. In NURS 185, candidates are expected to write a professional and appropriate letter to a legislator regarding a current bill the candidate is following through the various legislative committees. The letter, part of a legislative assignment, is reviewed and points credited by the candidate's instructor. Candidates, while participating in online discussion in all four core school nurse courses, are expected to reread their postings to check for typos, spelling errors, and clarity, before submitting them.

In NURS 185, School Nurse Seminar, a question asks the candidates to evaluate their personal comfort in making an oral presentation in front of an audience, then they are directed to read through selected readings that will help the candidate develop self confidence in preparing and making oral presentations. Another question asks the candidate to prepare an outline that could be used to develop a PowerPoint presentation for a school board meeting on the role of the school nurse. Competency with regard to clarity and effectiveness of candidate oral communication is demonstrated in NURS 186, School Nurse Practicum I, (elementary) and in NURS 187, School Nurse Practicum II (secondary). In NURS 186, candidates are asked to present an age appropriate health lesson to a class or group elementary school age children. It is expected that the candidate's preceptor will be present during the presentation and will provide feedback, along with the classroom teacher, and the target audience. Candidates are expected to include a pre-post test along with the lesson that will help to determine learning outcomes.

Candidates are also expected to write a personal critique relating their experience, including strengths and weakness that need to be addressed before future presentations. In developing the lesson plan, candidates are expected to follow the guidelines for appropriateness of subject matter and learner readiness found in the CDE (2003) *Health Framework for Public Schools: Kindergarten through Twelfth grade*. In NURS 187, candidates are expected to make a choice between developing curriculum and presenting it in the classroom to a group of adolescents, or choice to facilitate several discussions among a group of secondary students related to common health issues. In NURS 185, *Week 4*, Guidelines for creating and facilitating groups and the group process are covered. As with the classroom presentation in NURS 186, the same guidelines for evaluating teaching effectiveness are followed in NURS 187. Candidates are also encouraged to take leadership roles in both practicum courses, this frequently involves making presentations at a faculty meeting, to a parent group, and even a school boards. Other types of oral communication are also monitored by the candidate's preceptor with regard to students coming into the health office, communication with other professionals, and in counseling with individual students and others.

The candidate demonstrates his/her ability to communicate effectively in writing and in making clear oral presentations to a wide variety of audiences:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. [See Sec. 3](#) (p. 396 and p. 401), Preceptor Syllabus checklists #E35 (elementary), and #S34 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 5: Candidates organize and maintain accurate and complete health records.

In NURS 184, Introduction to School Nursing, *Week 3*, candidates are asked to respond to a question that asks them to compare the key provisions of HIPAA (Health Information Portability and Accountability Act of 1996), and FERPA (Family Education Rights and Privacy Act), the impact these laws have on school nursing practice and the steps school nurses need to take to stay within these laws. Candidates distinguish the difference between FERPA, which allows access to educational records by anyone with a legitimate educational interest, though this leads to confusion because it is left up to school districts to define who those individual are and the access limitations; and HIPAA, which does not govern school health records, however, affects schools because it can impede them from obtaining identifiable student information from health care providers. Therefore, candidates understand the need for a Release of Information in order to obtain and share confidential health information with health professionals in the community. Candidates also learn about the importance of using common nursing language and classification in writing. In NURS 184, *Week 9*, a question relates to the importance of sound documentation and use of standardized nursing language in school nursing practice. Candidates are asked to define “Nanda,” “Nic,” and “Noc,” and use of these terms by demonstrating their understanding through the developing of an IHP (individual healthcare plan) for a child with special needs. Throughout the ensuing weeks in the semester in NURS 184, candidates are asked to use standardized nursing language in developing IHPs that coincide with other weekly questions related to supposed clients with various health conditions.

In NURS 186 and NURS 187 (practicum courses), preceptors are expected to review candidate IHPs and documentation in student records, both hard copy and electronic. Record keeping is expected to be legible, succinct, sequential record of events, i.e. SOAP format; and the rule followed “if it isn’t documented, it isn’t done.” Candidates understand that accurate and complete record keeping is a vital aspect of school nursing. They learn that confidentiality and the maintenance of health records is a recurrent area of discord for school health professionals because health records are not distinguished from other types of education records, and because FERPA is less stringent than the laws that protect health records in a healthcare setting. While working under the guidance of a school nurse preceptor, candidates gain insight into the guidelines that they are expected to follow with regard to allowing access to school health

records. They are also expected to have insight into the sections of the Education Code related to confidentiality and student records. Candidates learn that the school nurse is legally and ethically responsible for protecting client privacy and confidentially, that health-related information in schools should only be shared on a need-to-know basis and that a parent have the ultimate right to decide what is shared and with whom. Candidates also learn that some confidential information that does not relate specifically to the student's educational experience should not be written or filed in the student's health record, but that the school nurse should keep this information in a personal confidential file completely separate from school files while the problem is resolved, and that this information should not be shared.

The candidate demonstrates the ability to maintain and accurate and complete health records:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. **See Sec. 3** (p. 396 and p. 401), Preceptor Syllabus checklists #E38 (elementary), and #S36 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 6: Candidates use their time effectively, and manage fiscal and personnel resources prudently.

The importance of time management in school nursing is continually stressed in the program. This begins with helping candidates realize that being proactive and keeping up with assignment work on a weekly basis is paramount to stress reduction and enjoying the learning experience, and that this is also true in school nursing. It is pointed out to candidates that school nurses must be proactive, well organized, and prepared for inevitable interruptions. In NURS 186 and NURS 187 (practicum course) candidates are expected to keep a log of hours and document how their time is spent in clinical practice. In NURS 186, a journal question asks candidates to locate their job description for the school nurse to determine its relevancy to school nursing today and to realistically compare the time that the school nurse (the candidate if employed as a school nurse) has at a particular school site with the job expectations. Candidates are also expected to compare their job description with those of classmates during online discussion, as well as review the role of the school nurse described in Selekman (2004) *School Nursing: A Comprehensive Text* (course text). Finally, candidates are asked if there are things that they would like to see changed in their job description, with the suggestion that the candidate consider discussing their findings with their supervisor/school administrators. Another NURS 186 journal question asks the candidate to talk to their school principal and staff at the school site about the role of the school nurse, thereby promoting a realistic view of the school nurse's role relevant to the amount of time he/she has at the site with the hope that understanding that will allow the school nurse to use his/her time more effectively. A third NURS 186 journal question asked the candidate to talk to their preceptor about time management strategies, and methods for organizing and planning the

school nurse's school year. Candidates are then asked to compare and contrast their preceptor's method of time management with their own. In writing up their response to the question, candidates are to discuss ideas and time management methods they would incorporate or change as a result of the meeting with their preceptor. Candidates are also expected to consult with their text, Selekman (2004), *School Nursing: A Comprehensive Text*, for a further comparison in responding to the question. In both NURS 186 and NURS 187, candidates are evaluated by their preceptors with regard to their ability to organization and manage time wisely.

Candidates gain insight into fiscal management in their practicum experiences through spending quality time with an experienced school nurse preceptor who is able to share insight into grant opportunities for creating new programs and budget constraints with regard to ordering equipment and supplies. In NURS 186, School Nurse Practicum I, a journal question asks candidates to interview the district budgetary manager regarding the various sources of revenue that come into the school district (federal, state, county, and money from grants), and how it must be spent, i.e., categorical funds and percentage of money that is allotted for health services for personnel, equipment, and supplies for district schools. That same question asks candidates to assess the supplies in their school health office (or that of their preceptor) and to determine the district cost for one particular item, i.e. a box of band aids, and calculate how much is spent on that one item each year alone. Candidates are also to compare findings with information found in the Selekman text. In NURS 185, School Nurse Seminar, *Week 13*, candidates learn about grant writing in order to find funding sources for new programs and services. A question is asked about Healthy Start Grants, their establishment, key components and governance structure. It is suggested that candidates find out if a Healthy Start Grant has been funded in their school district and plan a visit to gain insight into how the funds are being used. In *Week 14*, the majority of the weekly questions relate to billing options for school health services and the role of the school nurse. In the first question, candidates are asked about MediCal billing options and the qualifying factors that allows the school nurse to bill for services; the second question, asks about MAA (MediCal Administrative Activities) and billing categories; a third question asks candidates to discuss TCM (Targeted Case Management) and who qualifies for services; a fourth question asks candidates to discuss district distribution of reimbursed funds and the population that should benefit from the reimbursement funds; and a fifth question asks candidates about "resource mapping," to determine funding sources, in this case, to fund defibrillators for several school sites.

In NURS 184, Introduction to School Nursing, the subject matter for *Week 3*, there is a cluster of weekly research questions that related to the role of the school nurse as a leader. What is a leader? What should a leader be able to do? What are leadership traits? How does the candidate see him/herself in a leadership role? Another cluster of questions asks candidates to relate the duties of the health clerk or health aide in the health office. Candidates are asked to discuss the educational background, depth of training, limitations, evaluation, and importance as a member

of the healthcare team. Candidates learn that the health aide is a valuable member of the healthcare team; that the duties the health clerk or aide are able to perform are not those of the school nurse, though free the school nurse to carry out those school nursing duties. In *Week 4*, candidates are asked to discuss the importance of employee satisfaction and important factors that lead to employee contentment and commitment, further to discuss employee concerns, motivation and need for support and encouragement; and to listing ways that a supervisor or employer can model behavior that they would like to see reflected in subordinates and others. Other questions for that week related to the concept of administration, management and conflict management skills. In NURS 186 and NURS 187 (practicum courses), candidates learn to appreciate the value of a reliable health aide or health office clerk. Gaining insight from an experience school nurse preceptor with regard to the role of the health clerk/aide and knowing the limitations of the job description and educational background of these valuable assistance, gives the candidate the knowledge necessary to be able to train and assign a health clerk/aide appropriate duties that complement, not conflict with the school nurse role. From assignments in NURS 184, candidates gained insight into the needs of employees for recognition, appreciation, and consideration and can factor these things in when interacting with these employees.

The candidate demonstrates the ability to use their time effectively, and manage fiscal and personnel resources prudently:

This is evaluated by clinical instructor through journaling and through direct observation by the preceptor. [See Sec. 3](#) (p. 396 and p. 401), Preceptor Syllabus checklists #E39 (elementary), and #S37 (secondary). The preceptor must initial the competency and sign the checklist indicating all competencies have been met at the end of semester.

Criterion 7: Candidates demonstrate the ability to train, supervise and monitor others who may assist with medication administration and may provide specialized physical health care procedures to students.

In NURS 184, Introduction to School Nursing, Week 5, candidates have the opportunity to respond to clusters of research questions asking the candidate to discuss legal guidelines for providing medication to pupils in school, i.e., who administers or assist the student to take the medication? Which emergency medications can be administered by a UAP (unlicensed assistive personnel) and which cannot? Candidates are also responsible for identifying the section of the Education Code that specifically addresses medication at school and sections of the Business and Professional Code that relate specifically to the Nurse Practice Act, which clearly spells out the guidelines that registered nurses are to follow with regard to training UAPs. In another cluster of questions, candidates are asked to discuss the steps the school nurse will take in training UAPs to “assist” school age children in taking medication and which emergency medications may be

administered by a UAP in the absence of the school nurse. Other questions related to training guidelines that cover the “five rights” in giving medication, competency issues and accountability. In the Documents sections in the online program in all four core school nurse courses, candidates find documents related to the legal guidelines, court decisions, and the role of the school nurse in training UAPs with regard to medications. Several of these documents relate specifically to the administration of insulin. In Week 15, a cluster of questions relates to outlining the important steps the school nurse must take in training UAPs to provide special physical healthcare procedures. Again, competence and accountability and the question is asked, who is responsible for the competency of the individual trained? What is the responsibility of the school nurse in the event a care provider is hired from an outside agency?

In NURS 186, candidates are required to spend time working under the supervision of a qualified school nurse providing specialized physical healthcare procedures to school age children who are medically fragile and those requiring specialized physical healthcare procedures. Candidates, under the supervision their school nurse preceptor, also have the opportunity to train UAPs, or work with their preceptor in training UAPs, who are expected to assisting students with taking medications and to administer approved emergency medications in the absence of the school nurse. Again, under the supervision of their school nurse preceptor, candidates are also expected to supervise, monitor, and evaluate UAPs, and others, who will provide specialized physical healthcare procedures.

California State University

School Nurse Services Credential Program

Program Curriculum Matrix

California Commission on Teacher Credentialing Standards 1-9

November, 2010

PROGRAM MATRIX – CCTC STANDARDS

Course Key	Pre-R		Courses										Q
Prerequisites to entering program: Statistics, Nursing Research, and Community Health	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E	
Program Courses: CDDS 125, Audiometry for School Nurses													
SPED 120, Mainstreaming Special Individuals			2	7	2	3	3	8	8	8	8		
COUN 174 (200), Introduction to Counseling													
NURS 136, Health Appraisal			5	4	0	6	7	3	4	5	6		7
NURS 137, Teaching Strategies for HC Client													
NURS 183, Vision and Scoliosis in the School Setting													
NURS 184, Introduction to School Nursing													
NURS 185, School Nurse Seminar													
NURS 186, School Nurse Practicum I (Elementary)													
NURS 187, School Nurse Practicum II (Secondary)													
COMPONENTS					Where standard is addressed								
Program Standard 1: Program Design													
The school nursing services program and any prerequisites include a purposeful sequence of coursework and field experiences that effectively prepare candidates to provide school nursing services to all students to optimize learning. The school nursing services program prepares candidates to understand contemporary conditions of schools and society and how school nursing services need to change and evolve to address these changing conditions.												Yes	

The design of the program is based on a clearly stated rationale that has a sound theoretical and scholarly foundation anchored to the knowledge base of school nursing.													Yes
By design, the program provides extensive opportunities for candidates to:													
(a) learn to address the health related educational needs of all students;			X	X	X	X	X	X	X	X	X	X	Yes
(b) learn to access and use community resources to address the health related needs of students, parents, staff, and other members of the educational community;		X							X	X	X	X	Yes
(c) learn to develop and implement appropriate plans of care as needs of students,									X	X	X	X	Yes
(d) know and understand the roles and responsibilities of school nurses within the educational setting; and									X	X	X	X	Yes
(e) to demonstrate their knowledge, skills and abilities with respect to the school nurse competencies as exemplified in the School Nurse Competencies (SNCs) provided in Appendix A.			X			X		X			X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.													Yes

Course Key	Pre-R	Courses										Q
Prerequisites to entering program: Statistics, Nurse Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS			Where standard is addressed									
Program Standard 2: Collaboration in Implementing the Program												
Sponsors of the school nurse preparation program establish collaborative arrangements with other institutions and entities that contribute substantively to the quality and effectiveness of the design and implementation of candidate preparation.										X	X	Yes
These arrangements address significant aspects of professional preparation, and include collaboration between school nurse preparation program providers and local education agencies.										X	X	Yes
Participants cooperatively establish and review the terms of the agreements, including well-defined roles, responsibilities and relationships.										X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.												Yes

Course Key	Pre-R		Courses										Q
Prerequisites to entering program: Statistics, Research, and Community Health	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E	
Program Courses: CDDS 125, Audiometry for School Nurses			2	7	2	3	3	8	8	8	8		
SPED 120, Mainstreaming Special Individuals													
COUN 174 (200), Introduction to Counseling													
NURS 136, Health Appraisal			5	4	0	6	7	3	4	5	6		7
NURS 137, Teaching Strategies for HC Client													
NURS 183, Vision and Scoliosis in the School Setting													
NURS 184, Introduction to School Nursing													
NURS 185, School Nurse Seminar													
NURS 186, School Nurse Practicum I (Elementary)													
NURS 187, School Nurse Practicum II (Secondary)													
COMPONENTS					Where standard is addressed								
Program Standard 3: Relationships between Theory Research and Practice													
By design, the school nurse preparation program provides a variety of opportunities for candidates to reflect, analyze, and implement the relationships between theory and evidence based practice related to school nursing.									X	X	X	X	Yes
In coursework, school-based observations and supervised fieldwork, candidates examine nursing, education, other theories and research, and their relationship to:													Yes
(a) student health and wellness;									X	X	X	X	Yes
(b) school and community health; and		X							X	X	X	X	Yes
(c) student achievement.									X	X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.													Yes

Course Key	Pre-R		Courses										Q
Prerequisites to entering program: Statistics, Nursing Research, and Community Health	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
Program Courses: CDDS 125, Audiometry for School Nurses													
SPED 120, Mainstreaming Special Individuals													
COUN 174 (200), Introduction to Counseling			2	7	2	3	3	8	8	8	8		
NURS 136, Health Appraisal			5	4	0	6	7	3	4	5	6	7	
NURS 137, Teaching Strategies for HC Client													
NURS 183, Vision and Scoliosis in the School Setting													
NURS 184, Introduction to School Nursing													
NURS 185, School Nurse Seminar													
NURS 186, School Nurse Practicum I (Elementary)													
NURS 187, School Nurse Practicum II (Secondary)													
COMPONENTS					Where standard is addressed								
Program Standard 4: Preparation to Promote Student Health and Wellness													
The program prepares candidates to integrate health and wellness concepts in the educational setting to allow students to be in school, healthy, and ready to learn.							X		X	X	X	X	Yes
Candidates are knowledgeable about primary (disease prevention and health promotion), secondary (screening, emergency, acute care) and tertiary (rehabilitative or palliative care) levels of health care intervention related to students and their families.						X	X	X	X	X	X	X	Yes
For students to be optimally ready to learn, program ensures the candidate understands and can effectively apply critical concepts of health and wellness within school setting.													Yes
These include, but are not limited to:									X	X	X	X	Yes
(a) promoting school safety, including disaster preparedness;									X	X	X	X	Yes
(b) delivering first aid and emergency care;									X	X	X	X	Yes
(c) identifying and accessing local community and public health resources;		X							X	X	X	X	Yes
(d) addressing public health issues in the community that may affect schools;		X							X	X	X	X	Yes
(e) addressing student, family and community mental health and wellness;		X							X	X	X	X	Yes
(f) promoting nutrition and fitness;									X	X	X	X	Yes
(g) addressing specialized healthcare needs of students, including in special ed.					X	X			X	X	X	X	Yes
(h) understanding child and adolescent growth and development;						X			X	X	X	X	Yes
(i) promoting staff wellness;							X		X	X	X	X	Yes

(j) addressing issues of community and family violence and substance abuse;		X							X	X	X	X	Yes
(k) addressing acute and chronic diseases or conditions within the student population.						X			X	X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.													Yes

Course Key	Pre-R	Courses										Q
Program Courses: Statistics, Nursing Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS			Where standard is addressed									
Program Standard 5: The Sociocultural Context of School Nursing												
The program provides candidates with opportunities to further develop their understanding of the sociocultural context in which school nurses work.									X	X	X	Yes
As part of these opportunities, candidates experience the range of diversity represented within the local community including culture, ethnicity, language, age, gender, gender identity, students with special needs, socioeconomic status and value systems.		X									X	Yes
The program assists candidates to formulate strategies for identifying and appropriately addressing social and cultural community issues that affect school health and students' abilities to learn.		X							X	X	X	Yes
The program assists candidates to adapt their approach in order to meet the needs of English learner students and their families.									X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.												Yes

Course Key	Pre-R	Courses										Q
Program Courses: Statistics, Nursing Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS		Where standard is addressed										
Program Standard 6: Legal and Ethical Aspects of School Nursing Practice												
The program provides candidates with an understanding of the local, state and federal laws and regulations applicable to the practice of school nursing.								X	X	X	X	Yes
The program assists candidates to understand the practice of school nursing within a public educational system, including the structure and authority of school district administration, the scope and practice of school nursing as regulated by the California Board of Registered Nursing, applicable sections of the Education Code, and/or other relevant local, state, and federal codes and regulations.								X	X	X	X	Yes
The program helps candidates understand how to apply decision making skills in an ethical manner within situations unique to the school setting. The program encourages candidates to continue to grow and develop as professionals within the area of school nursing.								X	X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.												Yes

Course Key	Pre-R	Courses										Q
Prerequisites to entering program Statistics, Nursing Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS			Where standards are addressed									
Program Standard 7: Preparation for Health Management Responsibilities within the School Setting												
The program helps candidates understand the school nurse's role in providing health leadership and management, health education, health research, direct client care, training and supervision of other personnel as applicable, and planning and coordination of healthcare services and programs.	X						X		X	X	X	Yes
The program helps candidates understand and demonstrate a collaborative approach to providing and/or facilitating health-related activities, including acting as a member of a team addressing student achievement.									X	X	X	Yes
The program provides opportunities for the candidate to demonstrate effective communication, using a variety of supporting technology, with a wide range of audiences including students, staff, parents and community.				X					X	X	X	Yes
The program helps candidates apply his/her entry level knowledge of the standard nursing process of assessment, diagnosis, outcome identification, planning implementation, and evaluation specifically within the school setting in order to resolve or reduce barriers to student learning.						X			X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.												Yes

Course Key	Pre-R	Courses										Q
Prerequisites to entering program: Statistics, Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
2	7	2	3	3	8	8	8	8	8	8	8	
5	4	0	6	7	3	4	5	6	7			
COMPONENTS			Where standards are addressed									
Program Standard 8: Field Work Experience												
The program provides candidates with a broad range of hands-on school nurse field experiences in a variety of settings.										X	X	Yes
The program has a clearly defined and systematic process for the identification, selection and assignment of qualified preceptors.										X	X	Yes
The program bases field experience assignments on an individual assessment of each candidate's prior background and experiences.										X	X	Yes
Working collaboratively, course instructors and preceptors encourage and enable candidates to function appropriately and effectively in a school nurse role.										X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.												Yes

Course Key	Pre-R		Courses		Q										
Prerequisites to entering program: Statistics, Research, and Community Health	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1 1	C O U N 1 1	S P E D 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	R E S P O N S E		
Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)			2	7	2	3	3	8	8	8	8	8			
			5	4	0	6	7	3	4	5	6	7			
COMPONENTS															
Where standards are addressed															
Program Standard 9: Assessment of Candidate Competence															
Prior to recommending each candidate for a Health Services: School Nurse Credential one or more persons responsible for the program determine on the basis of thoroughly documented evidence that each candidate has demonstrated a satisfactory performance on a range of School Nursing Competencies (SNCs).															Yes
The program uses formative assessment processes to inform candidates of their status in relation to the SNCs, and to assure that candidates have the appropriate knowledge, skills and abilities prior to being recommended for the credential.										X	X	X		X	Yes
The evaluation of candidate competence is provided by at least one school nurse preceptor and one institutional supervisor.												X		X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.															Yes

PROGRAM MATIX - CTC STANDARDS – SCHOOL NURSE COMPETENCIES (1)

Course Key	Pre-R	Course										Q
Prerequisites to entering program: Statistics, Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C O M M H E A L T H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS			Where SNC 1 is addressed									
SNC 1: Providing health and wellness services (Primary Level Intervention)												
Candidates for a School Nurse Services credential understand how to provide a wide range of health and wellness services for students and the school community, including but not limited to state-mandated screenings, required immunizations and health education.												Yes
These services include, but are not limited to:												
(a) facilitating access to health care beyond the school setting;										X	X	Yes
(b) identifying available community health resources;										X	X	Yes
(c) promoting environmental health and safety;										X	X	Yes
(d) exercising leadership when necessary with collaborative agencies within the community;										X	X	
(e) promoting healthy nutrition of students and staff;										X	X	Yes
(f) providing coordinated health services to better manage limited resources;										X	X	Yes
(g) organizing and implementing the overall school health program;										X	X	Yes
(h) promoting the oral health of students;										X	X	Yes

Candidates promote mental health of students and staff; are alert to potential situations of child abuse and/or neglect and report such situations appropriately; and also recognize signs and symptoms of potential substance use and abuse and make appropriate referrals.												X	X	Yes
Candidates are alert to issues of student attendance and intervene appropriately to promote student attendance.												X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.														Yes

PROGRAM MATIX - CTC STANDARDS – SCHOOL NURSE COMPETENCIES (2)

Course Key	Pre-R	Courses										Q
Prerequisites to entering program: Statistics, Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S E A R C H	C D D S 1	C O U N 1	S P E D 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	N U R S 1	R E S P O N S E
COMPONENTS		Where SNC 2 is addressed										
SNC 2: Providing direct client care services (Secondary and Tertiary Level Intervention)												
Candidates in program demonstrate the ability to provide healthcare services to students and emergency and/or first aid assistance to others in the school setting.										X	X	Yes
They understand how to manage the acute and chronic healthcare of all students, including those who are medically fragile, such as students with spina bifida, cerebral palsy, and/or muscular dystrophy.								X	X	X	X	Yes
Candidates understand the case management process, and can appropriately apply that process to the school setting.								X	X	X	X	Yes
Candidates understand the process of identifying and responding to the potential spread of communicable disease, and also apply appropriate preventive measures.								X	X	X	X	Yes
Candidates effectively manage and implement screening programs and procedures.		X			X		X			X	X	Yes
Candidates assess and appropriately manage acute injuries that occur in school setting.										X	X	Yes
Candidates appropriately store, manage, and dispense medications to students, and appropriately document medication administration within the school setting.										X	X	Yes
Candidates appropriately identify crisis situations, and provide intervention services.								X	X	X	X	Yes
Candidates identify and address health-related barriers to learning (e.g., allergies, asthma, diabetes, seizures,ADHD).					X			X	X	X	X	Yes
The program meets other factors related to this standard of quality that may be brought to attention of the reviewers st												Yes

PROGRAM MATIX - CTC STANDARDS – SCHOOL NURSE COMPETENCIES (3)

Course Key	Pre-R	Cou r s e s	Q										R E S P O N S E
Prerequisites to entering program: Statistics, Research, and Community Health Program Courses: CDDS 125, Audiometry for School Nurses SPED 120, Mainstreaming Special Individuals COUN 174 (200), Introduction to Counseling NURS 136, Health Appraisal NURS 137, Teaching Strategies for HC Client NURS 183, Vision and Scoliosis in the School Setting NURS 184, Introduction to School Nursing NURS 185, School Nurse Seminar NURS 186, School Nurse Practicum I (Elementary) NURS 187, School Nurse Practicum II (Secondary)	S T A T & R E S	C O M M H E A L T H	C D D S 1 1	C O U N 1 7	S P E D 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	N U R S 1 1	
COMPONENTS			Where SNC 3 is addressed										
SNC 3: Professional Management Skills													
Candidates for a School Nurse Services credential demonstrate the ability to use their professional knowledge and skills to promote the overall health of the school community.											X	X	Yes
Candidates advocate appropriately with students, family, community, and others to promote healthy behaviors and lifestyles.											X	X	Yes
Candidates use and model evidence-based health care practices in the delivery of school nursing services.											X	X	Yes
Candidates can communicate effectively in writing and can make clear oral presentations to a wide variety of audiences.									X	X	X	X	Yes
Candidates organize and maintain accurate and complete health records.											X	X	Yes
Candidates use their time effectively, and manage fiscal and personnel resources prudently.											X	X	Yes
Candidates demonstrate the ability to train, supervise and monitor others who may assist with medication administration and may provide specialized physical health care procedures to students.											X	X	Yes
Candidates demonstrate the ability to work in a collaborative and collegial manner with others.											X	X	Yes
The program meets other factors related to this standard of quality that may be brought to the attention of the review team by the institution.													Yes

SECTION THREE

EXPANDED SYLLABI

Syllabus: CDDS 125

Audiometry and Audiology for School Nurses

Fall 2010

Syllabus for
AUDIOMETRY AND AUDIOLOGY FOR SCHOOL NURSES (CDDS 125)

Fall 2010

California State University, Fresno

Instructor: Dr. Cynthia A. Cavazos **Office Number:** PHS 201

Email: cynthiac@csufresno.edu

Telephone: (559) 278-6967

On-Campus Office Hours: Tues. 8:30 – 9:30 and 12:00 – 1, and Thurs. 8:30 – 9:30 and 11– 1.
Additional Hours available upon request.

Course Information:

Units: 3 units

Time: Online, except for on campus practicum scheduled for Sat., November 13 **OR** Sun., November 14 from 9:00 a.m. to 3:00 p.m.

Location for on campus practicum: PHS 216

Website: Blackboard at <http://blackboard.csufresno.edu/>

Prerequisites: Nursing major, or permission of instructor.

Textbooks:

- (1) Download free of charge the Manual for the School Audiometrist at:
<http://www.dhcs.ca.gov/services/hcp/Documents/audmanschool.pdf>
- (2) Optional purchase: Survey of Audiology: Fundamentals for Audiologists and Health Professionals, 2nd ed. D.A DeBonis and C.L. Donohue, Allyn and Bacon.
- (3) **Computer Requirements:**

In order to complete this course, you will need the following:

1. A PC or Mac with an Internet connection.
 - a. Access the Internet using the method you normally use to connect to the Web. If you need an Internet connection, contact CVIP at 559-278-1111.

- b. After your computer has connected to the Internet, open a Web Browser such as Netscape 4.0 or Internet Explorer 5.0. earlier versions will not work properly
 - c. By default, Blackboard sends mail to your CSUFRESNO email account. If you don't remember your password or user ID, want to reset your password, or need to create an email account, the ITS Help Desk can assist by contacting 559-278-7000, accessing the web page at: <http://www.csufresno.edu/ITS/> , or using the link on the email login page: <http://email.csufresno.edu>. If you do not check your CSUFRESNO email address regularly, please go in immediately and forward your messages to the account that you do check. Login (email.csufresno.edu), select "Options", and then "Settings" then enter the address you prefer under "Mail Forwarding". Please note: you must login to your CSUFRESNO email account and delete old messages or your mailbox will fill up and you will not be able to receive messages.
2. Microsoft Office and PowerPoint 2000 or newer version. If you do not have a valid version of Microsoft Office or PowerPoint, you may contact CVIP to purchase a copy at a reasonable price.
 3. Real Player or Windows media player for audio or video clips.
 4. Adobe Acrobat Reader. If you do not have the Adobe Acrobat Reader proceed to: <http://www.adobe.com> and download the FREE Reader. There is a link on the left side of this website to "Get Adobe Reader". You will need this plug-in to access documents posted in this class

Dissemination of Information:

This is an on-line course where course material will be made available via Blackboard. The following Blackboard components will be utilized:

1. Announcements
2. Course Documents: Modules containing weekly objectives, PowerPoint with audio, additional readings, external links, video clips, assignments and quizzes
3. Discussion Board: For general communication and question and answer forums
4. Emails: For personal/private communication only
5. Tools: For assignment submissions
6. Assessment tools: For completing quizzes
7. My Grades: For maintaining on-line grades

The course also requires a visit to California State University, Fresno for the practicum portion of the course scheduled for Saturday, November 13, 2010 **or** Sunday, November 14, 2010. Please plan accordingly. This experience is worth 100 points.

Examinations and Major Assignments:

Class quizzes are completed on-line and consist of short answer, multiple-choice and true/false style question that primarily derive from PowerPoint presentations and assigned readings for that specific module. Quizzes range in value from 10 to 25 points each and are timed with an allotment of 45 to 60 minutes. There are 12 quizzes throughout the semester and are tentatively scheduled as outlined in the course schedule contained within this syllabus.

There are 3 class assignments that are worth 15 to 50 points each. The assignments are used as a tool to measure your ability to synthesize material that has thus far been presented. Please see course schedule for due dates.

Final Examination is comprehensive and must be taken on-line during the designated time period. The same question format used for quizzes will also be used for the final. The intent of the final is to measure learning outcomes of course objectives. The final exam is valued at 75 points

On-Campus Practicum:

The on-campus practicum is an opportunity for students to get hands-on experience with the audiometric equipment (i.e., audiometer, otoscope, immittance audiometry, etc.). Students will practice administering and interpreting the variety of tests discussed during the semester. Throughout the day, students will demonstrate competencies on the various lab assignments as listed on the syllabus. This experience is valued at 100 points.

Discussion Board:

Within each module is a “question and answer” format. A question has been posted for all fourteen modules, but **you are only required to respond to eight forums**. You can choose the forum that you would like to answer and to receive credit the answer **must be posted by midnight of the specified deadline date**. Responses made after the deadline date will not be allowed credit.

Each student has the ability of earning up to five points on eight forums (total of 40 points) based on the level of your response. Participation to Blackboard discussion groups must be beyond a simple statement of “I agree” or “disagree” or “yes” or “no”. Meaningful, well-intended and thoughtful contributions will receive the five point maximum allowed per discussion board. I will do my best to keep a current running total of your participation points on the grade book housed within Blackboard.

You can also use these forums to ask your own question and answer the questions of others. I will consider your participation in this aspect for those students who have borderline grades (i.e., 89%). If you don’t have a question, you can still answer a question or make a comment to show your involvement.

Furthermore, there is also a “student lounge” to speak to your fellow students on items unrelated to class. Sorry, no extra points for this.

Make-up Policies:

You are expected to take all quizzes at the regularly schedule times. No special quiz times will be given. In case of emergency, please leave a message on voice-mail or an email before the exam. Leaving a message does not mean you will be automatically allowed to take the quiz. Emergencies imply cases such as hospitalization of student, death in the family, but not situations such as forgetting the exam date, being too stressed or busy. You still need to discuss the situation with me. Accepted make-ups will be taken during a prearranged date and time.

Attendance of the entire on-campus meeting is mandatory and no make-ups of this experience will be allowed. Students who are not able to attend the entire practicum will receive no points for this portion.

All assignments are due by midnight on the due date. It is your responsibility to make sure that assignments are turned-in on time. Late submissions will not be accepted and receive a value of zero.

Discussion board postings are also due by midnight as stated on the tentative schedule and late postings will be given a value of zero.

The final examination will be available online and must be taken by midnight of Friday, November 19, 2010 to receive credit. Any submissions beyond this time frame will not be graded and a value of zero will be assigned.

Grading policy:

The following will be used to calculate grades:

1. Class quizzes (12)	195 points
2. Class assignments	85 points
3. Discussion Board Participation	40 points
4. Ice Breaker	5 points
5. Practicum Attendance and Participation	100 points
6. Final Examination (online)	<u>75 points</u>
TOTAL POINTS	500 points

Grades are assigned according to the University Policy as outlined in the General Catalog. Grades will be determined based on the following:

A = 90 - 100%	B = 80 – 89%
C = 70 – 79%	D = 60 – 69%
F = 0 – 59%	

Grades of I, W, CR/NC will be issued ONLY as noted in the General Catalog.

Email:

The University provides free email accounts to all students. All CDDS 125 students are required to use their csufresno email address for instructor only related communications. If you have something of a personal nature that needs to be discussed, please use the personal email for communication.

General questions should be posted on the “Q and A” discussion boards so that I am not bombarded with questions that would be helpful for the entire class to “hear”, well actually read.

Course Goals:

This course prepares students in obtaining certification as a School Audiometrist. It provides an introduction to the profession of Audiology, hearing loss and its medical aspects. This course also encompasses the components of a hearing conservation program, basic assessment and management of individuals with hearing loss, and the fundamentals in interpreting diagnostic test results.

Objectives - Primary Learning Outcomes:

The goals for this course are intended to assist the Nursing student whose aim is to complete the requirements for the School Nurse credential. As part of this credential, a course on audiometric testing and the administration of a hearing conservation program is warranted. The competent student will successfully attain the following specific skills:

1. Overview of legislation and mandates impacting California's Newborn Hearing Screening Program (NHSP) and Hearing Conservation Program (HCP)
2. Knowledge of anatomy and physiology of the auditory system
3. Basic otoscopy
4. Comprehension of the pathways of human sound conduction
5. Discuss common disorders associated with the human auditory system
6. Fundamental audiological measurements
7. Knowledge of hearing loss and its impact on normal childhood development
8. Competency on audiometric screening
9. Proficiency of threshold tracking and testing
10. Skills with testing exceptional children
11. Completion of basic audiologic evaluation procedures of the auditory system
12. Fundamental interpretation of audiometric test findings
13. Comprehension of the school nurse's role in testing, recordkeeping, and management of California's Hearing Conservation Program
14. Familiarity with the latest technology and tools utilized to assess hearing sensitivity and aid in re(habilitation)

Practicum Experience:

The practicum experience is scheduled in the CDDS Dept at California State University, Fresno for Saturday, March 28 or Sunday, March 29. You will be notified within the first two weeks of class which day you have been assigned. In order to prepare, the following goals and objectives for the practicum are:

Goal 1: Ability to perform basic otoscopy

Objectives:

- a. Prepare client
- b. Easily manipulate otoscopy equipment
- c. External inspection
- d. Internal inspection
- e. Identification of landmarks, features, and/or disorders

Goal 2: Ability to perform listening check

Objectives:

- a. Ease with the manipulation of the audiometric controls
- b. Competency with completing the listening check form
- c. Simple troubleshooting

Goal 3: Ability to perform pure tone threshold screen

Objectives:

- a. Appropriate use of audiometric equipment
- b. Familiarity with the constraints of the test environment
- c. Understand the requirements of the HCP
- d. Proper instruction and preparation of client
- e. Perform hearing screening on another student
- f. Record findings
- g. Discuss pass/refer criteria

Goal 4: Ability to perform pure tone thresholds as part of a HCP

Objectives:

- a. Appropriate use of audiometric equipment
- b. Familiarity of the constraints of the test environment
- c. Proper instruction and preparation of client
- d. Perform hearing threshold test on another student
- e. Understand the requirements of the HCP
- f. Record findings
- g. Discuss pass/refer criteria

Goal 5: Ability to perform immittance testing

- a. Proper use of the equipment
- b. Appropriate instructions to the client
- c. Ability to interpret the tympanogram based on Jerger's classification system

- d. Identify disorders that require referral

Study Suggestions:

1. Plan to spend sufficient time working with the content of the course.
2. Read the assigned pages before the material is covered in the class.
3. Take notes from the audio of the PowerPoint presentations.
4. Study regularly, not the night before the quiz.
5. Please see me right away if you need help with the subject matter.

Classroom Behavior:

Please use netiquette while participating on-line. There is a good source on the “Welcome Letter” that was emailed to each student and is also posted on the announcement section of blackboard.

Students are encouraged to ask other students for general assistance by posting their questions on the discussion boards. Direct questions regarding the quizzes or exam are inappropriate as some students may have not yet taken the tests.

Please be on time for the practicum portion scheduled at California State University, Fresno. Any student who misses more than 30 minutes of the on-campus portion of the class will receive zero points. As a courtesy to others, please turn off all pagers and cell phones. Be respectful and considerate of others.

“The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. Differences of viewpoint or concern should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop an understanding of the community in which they live. Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class.”

Students with Disabilities:

Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students

with Disabilities (559-278-2811). Please notify the instructor immediately of any special accommodation you may need.

Honor Code:

“Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities.” You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Cheating and Plagiarism:

“Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one’s grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term ‘cheating’ not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one’s own work.” Penalties for cheating and plagiarism range from zero points to a grade of an F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University’s policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University catalog (Policies and Regulations). As an on-line course, you must always use your best ethical judgment.

Drop for Serious and Compelling Reason:

A request to drop a class for serious and compelling reasons must be completed in ink and on an add/drop card and must be approved by the instructor, the department chair and the Dean of the School. Documentation will be required prior to approval of a drop for serious and compelling reasons. Failing or performing poorly in a class are not an acceptable serious and compelling reason within the university policy, nor is dissatisfaction with the subject matter, class, or instructor. If for some reason you are not in a position to take this class and would like to drop it, please do so during the regular drop period.

Subject to Change:

This syllabus and schedule are subject to change in the event of extenuating circumstances. It is your responsibility to regularly (suggested at least every other day) check on announcements that may be posted on Blackboard.

Tentative Schedule:

DATE	ASSIGNMENTS/QUIZZES/EXAMS/ DISCUSSION BOARD (DB) POSTINGS – DUE BY MIDNIGHT OF LISTED DATE	POINT VALUE
Mon. 9/13	School Starts Module 1 (Introduction) opens Module 2 (Anatomy & Physiology of the Human Ear) opens	
Fri. 9/17	Quiz 1 opens Quiz 2 open DB 1 closes DB 2 closes	
Sun. 9/19	Module 3 (Otoscopy) opens Module 4 (Sound Conduction) opens	
Mon. 9/20	Quiz 1 closes Quiz 2 closes Icebreaker Due	10 20 5
Fri. 9/24	Quiz 3 opens Quiz 4 opens	

	DB 3 closes DB 4 closes	
Sun. 9/26	Module 5 (Disorders of the Ear) opens Module 6 (Audiometric Measurements) opens	
Mon. 9/27	Quiz 3 closes Quiz 4 closes	10 15
Fri. 10/1	Quiz 5 opens Quiz 6 opens DB 5 closes DB 6 closes	
Sun. 10/3	Module 7 (Effects of Hearing Loss) opens Module 8 (Audiometric Screening) opens	
Mon. 10/4	Quiz 5 closes Quiz 6 closes	20 10
Fri. 10/8	NO Quiz 7 Quiz 8 opens DB 7 closes DB 8 closes	
Sun. 10/10	Module 9 (Threshold Tracking) opens	
Mon. 10/11	Quiz 8 closes	25
Wed. 10/13	Assignment Module 7 due	50

Fri. 10/15	Quiz 9 opens DB 9 closes	
Sun. 10/17	Module 10 (Testing Exceptional Children) opens	
Mon. 10/18	Quiz 9 closes	20
Fri. 10/22	Quiz 10 opens DB 10 closes	
Sun. 10/24	Module 11 (Audiological Evaluation) opens	
Mon. 10/25	Quiz 10 closes	10
Wed. 10/27	Assignment Module 10 due	15
Fri. 10/29	Quiz 11 opens DB 11 closes	
Sun. 10/31	Module 12 (Audiometric Interpretation) opens Module 13 (Role of the School Nurse) opens	
Mon. 11/1	Quiz 11 closes	20
Fri. 11/5	Quiz 12 opens NO Quiz 13 DB 12 closes DB 13 closes	

Sun 11/7	Module 14 (Current Audiological Tests) opens	
Mon. 11/8	Quiz 12 closes	15
Wed. 11/10	Assignment Module 12 due	20
Thurs. 11/11	Quiz 14 opens	20
Fri. 11/12	DB 14 closes	
11/13 or 11/14	Practicum at California State University, Fresno	100
Mon. 11/15	Quiz 14 closes Final Examination opens – ONLINE	75
Fri. 11/19	Final Examination due	
	Discussion Boards	40
	Total Points in Course	500

Syllabus: COUN/PYSCH 174

Introduction to Counseling

Fall 2010

CALIFORNIA STATE UNIVERSITY - FRESNO
KREMEN SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT
DEPARTMENT OF COUNSELING, SPECIAL EDUCATION, AND REHABILITATION
5005 NORTH MAPLE AVENUE
FRESNO, CA 93740-8025
(559) 278-0340

Syllabus: COUN/PSYCH 174: Introduction to Counseling

Units: Three (3)

Semester Fall '10

Time: 7:00-9:50 pm

Day/Room Wednesday/Ed 170

Instructor: Ruth Shaeffer Ed.D., LMFT

Office Hours: By appointment only.

Email: ruth_shaeffer@csufresno.edu (the **BEST** way to reach me)

SCHOOL'S THEME, MISSION AND VISION:

School Theme: "Making a Difference in a Diverse Society: Leadership for a New Millennium."

Vision: The Kremen School of Education and Human Development is committed to developing the knowledge, skills, and values for education leadership in a changing, diverse and technologically complex society.

Mission: The Mission of the School of Education and Human Development is to educate students to become teachers, administrators, counselors, and educational specialists to provide for the educational needs of children and adults, with special attention to diversity and equity.

REQUIRED TEXT:

Corey, Gerald (2009). *Theory and Practice of Counseling and Psychotherapy*. (8th edition).
Brooks Cole: Pacific Grove, CA.

An electronic version and print version of this text is now available for purchase (either in full or in part) at www.ichapters.com You can purchase and download as text , eBook or individual chapters at significant savings.

RECOMMENDED READING:

Remley, T. P. & Herlihy, B. (2001). *Ethical, legal and professional issues in counseling*.
Alexandria, VA: ACA Press

HANDOUTS

A copy of lecture outlines and chapter study guide questions are posted on Blackboard (blackboard.csufresno.edu). You will find these helpful as you take notes and study for exams. Important class announcements will be posted on Blackboard and you will also have access to your assignment, attendance points, quiz scores, exam scores, and extra credit points. You must have a Fresno State email account in order to access Blackboard. Registered students can obtain a free email account online at <https://zimmer.csufresno.edu/csuf/index.html>. Your Blackboard login and password are the same as your CSUF email login and password.

COURSE DESCRIPTION

Overview of basic counseling models and of the biological, social, and psychological factors that affect behavior over the life span (3 units).

COURSE OBJECTIVES/LEARNING OUTCOMES

Through successful participation in the course the student will be able to:

1. Describe major counseling theories including Psychoanalytic, Adlerian, Existential, Person Centered, Gestalt, Behavior, Cognitive-Behavior, Feminist, Postmodern and Family Systems.
2. Recognize, analyze, and discuss counselor-client characteristics and roles with respect to various counseling methods.

3. Recognize the relational conditions required in establishing an effective therapeutic alliance.
4. Identify current legal and ethical issues in the field of counseling.
5. Analyze appropriate implementation of counseling approaches with respect to different counseling settings, issues, and populations.
6. Utilize counseling theories and knowledge to gain perspective on his/her personal life experiences. This includes a required personal experience in the role of the client.
7. Discuss current literature regarding counseling theories and models.
8. Understand the importance of counselor advocacy.

PHILOSOPHICAL MODEL and KNOWLEDGE BASE

This course is a prerequisite for the graduate programs in Counselor Education. The course introduces students to the theme of “making a difference in a diverse society” by focusing on the foundation skills and concepts of counseling and their relevance to different client groups. The model presented is that of reflective collaborative counselor, one who is sensitive to the subjective reality of clients and who works in collaboration with families, schools, and communities to achieve counseling goals. The course addresses the strengths and limitations of counseling theories and practices as they apply to diverse populations, including those with disabilities and different life-style orientations.

The knowledge base for the curriculum emphasizes four dimensions:

1) *Philosophical and ideological*, which exposes students to the historical and contemporary theories of counseling and encourages students to integrate these into their own perspective and personal life experience; 2) *Cognitive and reflective*, which exposes students to the principles and techniques of counseling, especially the core clinical skills of empathy, respect, genuineness, concreteness, immediacy, confrontation and self-disclosure, which are the building blocks of the reflective counseling approach that need to be mastered for success in later course work; 3) *Integration and application*, which introduces students to the specific strategies required for effective counseling interventions in a variety of settings and problem situations; and 4) *Diversity*, which highlights multicultural perspectives, strategies and issues in counseling.

If you have special needs as addressed by the American Disabilities act and need course materials in alternative formats, please notify your instructor immediately. Reasonable effort will be made to accommodate your special needs.

Safe Assignment

The campus utilizes the SafeAssignment plagiarism prevention screening service, and you will be asked to submit written assignments to SafeAssignment accessed through Blackboard (blackboard.csufresno.edu).

Your reflection paper must be submitted to SafeAssignment (accessed through Bb located under Course Documents) and will be evaluated for plagiarism detection only and for no other purpose. SafeAssignment will send an Originality Report for each submission to me and your Originality Reports will be available for your viewing. Only you and I will have access to the results. You may submit your paper more than once prior to the final submission date. Please note that if you quote or cite a source, SafeAssignment will code the work as not original. I am aware of this feature and can override those areas.

REQUIREMENTS

1. Four (4) Counseling Sessions with a Reflection Paper (a minimum of 4 complete pages, (no more than 5 pages) typed, double-spaced, 12-pt. font Times New Roman, no more than 1.25 inch margins). Your paper will be submitted through SafeAssignment located in Course Documents on Blackboard (Bb) no later than 7 days after your final counseling session.

The four (4) counseling sessions provide an important experiential component to the class. You are involved as a client in a counseling relationship. You will learn to recognize relational conditions required to establish a counseling relationship with clients. You will also gain perspectives on your personal life experiences.

You may arrange for this individual counseling experience through the Counselor Education Program Training Lab, or through other legitimate counseling services. The sessions in the Training Lab are free and are held in the clinical lab in the Atrium level of the Education Building. The COUN 208 instructors will **drop** you from counseling services **if you fail to show two times** (without notifying your student counselor). If you miss a session and are unable to make it up, points will be deducted from your paper. If you have seen a licensed or pre-licensed therapist for at least four (4) individual sessions during the last 6-12 months you may bring in a signed verification (including dates of sessions) from your therapist and write your reflection paper from that experience. Your counseling sessions will not be evaluated for a grade per se, but your reflection paper will be evaluated on spelling, grammar, and on the basis of whether or not you address the questions listed below. Your opinion of the sessions will not be reflected in your grade. The counseling sessions are a prerequisite for receiving a grade in this course. Your Reflection Paper should express your impressions of the experience.

Please specifically address the following 7 questions as you write your paper.

1) What were your feelings, thoughts, apprehensions, resistance, and expectations going into the experience? 2) Were these feelings and thoughts validated by your experience? 3) When did you sense rapport building with your counselor? 4) How did you know you were/were not making progress? 5) What did you learn/notice about the counselor and about yourself? 6) How did you feel at the end? 7) What was your overall evaluation of the experience? Reflection Papers must be referenced in APA format, typed, double-spaced, edited for grammar and spelling, and at least **4 complete pages** in length and no more than 5 pages (**do not type the questions**). Your FINAL submission of this paper to Turnitin on Bb is due no later than seven days after your final counseling session. Attach the reflection paper evaluation form to the “verification” form from your 208 counselor (or a signed letter from your private counselor) and turn that in to me as soon as your counseling sessions are completed. **Your submitted reflection paper is due seven days after your final counseling session. Points are deducted for sessions missed, for late papers, and for papers that are not the required length.** Your papers will be graded and returned to you through Bb.

2. – 5. Three exams and final exam. The exams may include short answer essay, true/false, “list and describe,” and multiple-choice questions. For these exams you will be asked to discuss, explain, define, and illustrate key concepts, goals, techniques, and issues presented in the textbook, class discussion and videos. Use the study guides (posted on Bb) and lectures to help you focus on the key material. The final exam will cover specific chapters as well as emphasize an integrative perspective of the counseling theories presented throughout the semester. The final also includes matching questions. All students are required to take the final. Exams are partially scored in class and scantron sheets are **not** needed. If you fall behind in your studies or find that you are not doing as well as you expect on the exams or on any other aspect of your course work, please feel free to talk to me before or after class, or you can schedule a meeting or a telephone conference.

6. Chapter Quizzes

There will be a short, five-question chapter quiz at the beginning of each class lecture that covers a new chapter with the exception of Ch 10 and Ch 14 (two quizzes each chapter—see course schedule). Questions will be true false, multiple choice and fill in the blank. **If you are absent or late to class you may not make up the quiz;** however, there will be opportunities for earning extra credit during the semester. Take-home quizzes will **not** be accepted late.

7. Attendance and Participation

The class will involve a variety of formats: lecture-presentations, discussions, film and videotape, and small group activities. Sign-in sheets will be utilized to record attendance. **If you fail to sign in, you will not be counted as present in class. If you take a quiz at the beginning of class and leave, you will not be counted as present in class.** Regular attendance in class and participation in small groups are expected. Please contact me if you need to miss a class session. If you **contact me by email in advance or on the day**, your absence will be excused. **When you email, please place YOUR NAME and CLASS ID in the subject line, or your absence MAY NOT be excused.** My email address is: ruth_shaeffer@csufresno.edu. Attendance and participation are evaluated as follows:

Participation and all classes attended	= 45 points
Participation and one/half class missed	= 38.5points
Participation and one class missed	= 31.5 points
Participation and one and one-half classes missed	= 27 points
Participation and two classes missed	= 22.5 points
Participation and two and one-half classes missed	= 18 points
Participation and three classes missed	= 13.5 points
More than three classes missed	= 0 points

At the beginning of the semester you will notice that you have 45 points for attendance recorded on Blackboard. If you do **not** notify me regarding your absence (as indicated above), the appropriate number of attendance points will be deducted from your attendance score on Bb. It is your responsibility to monitor your attendance points on Bb, and if you see a discrepancy to send me an email immediately.

7. Make Up Policy for Planned and Unplanned Absences: In the case of an unplanned student absence, papers, tests, and/or homework assignments due during the time the student is absent may be made up only if the student contacts the instructor as soon as practicable after the absence occurs and works out a plan. (Quizzes may **not** be made up.) In case of authorized absences due to university-sponsored activities, students should expect to submit their work to the instructor on or before the due date, or as arranged with the instructor. This includes papers, tests, and /or homework assignments. See grading policy in syllabus for additional information.

8. GRADING

The University criteria for letter grades, as outlined in the university catalog, will be followed. Exams will be graded according to the following percentage scale: A=90-100; B=80-89; C=70-79; D=60-69; F=below 60. Papers will be evaluated according to content, effort, and accuracy. The letter grade that you receive for this class will be based upon the following:

<i>Description</i>	<i>Points</i>
Verification of 4 counseling sessions and reflection paper.	
The counseling experience is a <u>prerequisite</u> for receiving a grade in this course.....	60
15 Quizzes on Ch 2-10/12-15.....	75
1 st Exam.....	60
2 nd Exam.....	60
3 rd Exam.....	60
Final Exam.....	70
Attendance and Participation.....	45
TOTAL.....	430
Grade Points	
385 – 430 = A	
342 — 384.5 = B	
299 – 341.5 = C	
253.5 — 298.5 = D	
0 — 253 = F	

SUGGESTED READING

Your text contains a comprehensive list of suggested references and readings at the end of each chapter.

OFFICE HOURS: Please feel free to visit with me before or after class. If you would prefer to schedule an appointment and/or leave me a message, please email. Email is the very **best** way to reach me. I will attempt to reply within 24 hours.

SERVICES FOR STUDENTS WITH DISBILITES: “Americans with Disabilities Act (ADA) Accommodation: The University is committed to providing reasonable academic accommodation to students with disabilities. The Office of Services for Students with Disabilities provides university academic support services with special assistance to students with disabilities. Individuals with physical, perceptual, or learning disabilities as addressed by the Americans with Disabilities Act should contact Services for Students with Disabilities for information regarding accommodations. Please notify your instructor so that reasonable accommodation can be made. If you expect accommodation through the ADA, you must make a formal request through Services for Students with Disabilities. Tel (559) 278-2811.” *

CHEATING, PLAGIARISM, AND COPYRIGHT: Copyright law and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permissions from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its copyright web page.

Digital Campus course web sites contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you (1) do not modify it, (2) use it only for the duration of the course, and (3) include both this notice and any copyright notice originally included with the material. Beyond this use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who

improperly use copyrighted material placed on the web site or distributed in class.

Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work. Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Schedule of Courses (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

HONOR CODE: "Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration).
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action. You will be expected to sign a form agreeing to the above Honor Code.

COMPUTER/INTERNET ACCESS REQUIREMENT: At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS> or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources." *

STATEMENT ON DISRUPTIVE CLASSROOM BEHAVIOR : The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the right of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop an understanding of the community in which they live. Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class.” *

- (Excerpts from Schedule of Courses and the University Catalog)

COUNSELOR EDUCATION PROGRAM POLICY ON THE USE OF ELECTRONIC DEVICES IN THE CLASSROOM (ADOPTED 12-11-07): Living in these modern times comes with unique challenges that, by their very nature, may degrade the learning environment, create a disrespectful environment for the professionalism of the instructor, and be a nuisance for all. As such, the department has adopted guidelines for appropriate use of electronic devices within the classroom. **Cell Phones:** Students must put cell phones on “silent mode” (**not** "vibrate mode") upon entering the classroom, and all cell phone business must be handled on breaks. In some specific laboratory settings, the presence of even "silent" cell phones may interfere with electronic devices used to advance the learning process, and in such cases your instructor may require that you turn cell phones to the "off" mode. "Texting" during class is offensive and will not be tolerated. If you are "on call" for a mental health agency or some other urgent service, let your instructor know in advance of each class meeting that you have such responsibilities. **Computers:** While computers are generally welcome in most classrooms (unless otherwise specified by the instructor), their use is strictly confined to direct educational support for the specific class being attended (note taking, seeking course-related material, etc.). The use of an open computer for activities such as instant messaging, chatting, social networking (myspace, facebook, etc.), shopping, bidding, surfing, e-mailing, etc., are strictly prohibited. **iPods, iPads, iMP3 players, etc.:** The use of such devices, with the accompanying use of earphones, ear buds, etc., is strictly prohibited. Of course, assistive devices of a similar nature are always welcome; the instructor should be apprised in advance of their presence. Students who are in violation of this policy and have been previously warned are considered to be in violation of the **University Policy on Disruptive Classroom Behavior** and will be subject to disciplinary action.

Tentative Course Schedule

Minor changes may be made by the instructor. If you are absent from class, it is your responsibility to check on announcements made while you were absent.

	Date	Topic	Reading Assignment
1	Wed, Aug 25	Introduction, overview The counselor, person, and professional	Ch 1; take-home quiz Ch ½; Ch 2
2	Wed, Sept 1	Ethical Issues in Counseling Video /Groups	Ch 3 and quiz; turn in Ch1/ 2 quiz; Ch 3 discussion questions from Bb
3	Wed, Sept 8	Psychoanalytic Therapy Video /Groups	Ch 4 and quiz
4	Wed, Sept 15	Adlerian Therapy	Ch 5 and quiz
5	Wed, Sept 22	Exam Existential Therapy; Video /Groups	Ch 1-5 Take-home quiz for Ch 6
	Wed, Sept 29	Person Centered Therapy	Ch 7 and quiz; turn in Ch 6 quiz; Rogers
7	Wed Oct 6	Gestalt Therapy	Ch 8 and quiz
8	Wed, Oct 13	<i>Exam</i>	<i>Ch 6-8</i>
9	Wed, Oct 20	Cognitive Behavior Therapy pt. 1 Video /Groups	Ch 10 pt 1 pp. 268-283 & quiz; turn in Ch 9 quiz
10	Wed, Oct. 27	Cognitive Behavior Therapy pt 2	Ch 10 pt. 2 pp.283-206 and quiz;
11	Wed, Nov 3	Feminist Therapy Video/Groups; Review for exam	Ch 12 and quiz Ch 9, 10, 12
12	Wed, Nov 10	Exam Post-modern approaches; Videos/Groups	Ch 9, 10, 12 Take-home quiz for Ch 13
	Wed, Nov 17	Family Systems Therapy Video/Groups	Ch 14 and 1 st quiz; turn in Ch 13 quiz;

13	Wed Nov 24	<i>Thanksgiving Break</i>	Enjoy!
14	Wed, Dec 1	Family Systems Therapy cont'd	<i>Ch 14 cont'd and 2nd quiz</i>
15	Wed, Dec 8	An Integrative Perspective & Advocacy Video/Groups; Review for Final	Ch 15 quiz, study guide questions and advocacy
Final Exam Preparation & Faculty Consultation Days:		Thursday and Friday	Dec 9-10
Final Semester Examinations		Monday-Thursday	Dec 13-16
Final Exam in this course		Wednesday 8:00 PM-10:00 PM	Dec 15

Syllabus: COUN 200

Introduction to Special Education

Fall 2010

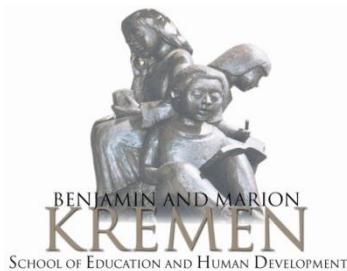
Leadership for Diverse Communities

Fall 2010 Syllabus for
COUN 200, Seminar in Counseling Techniques (3)

H. Dan Smith EDD, MFT

California State University, Fresno

Department of Counseling, Special Education, & Rehabilitation



Phone: 559/278-0329 **E-mail:** dans@csufresno.edu **DAN-O-CAM:**
<http://smith.soehd.csufresno.edu>

Kremen School of Education and Human Development

Vision: The Kremen School of Education and Human Development is a center for academic excellence and collaboration in the fields of education and counseling. Graduates will become community leaders who advocate for high standards and democratic values with attention to professional ethics and diversity. Integration of educational technology and performance assessment is essential to all programs.

Mission: The Kremen School of Education and Human Development's mission is the recruitment and development of ethically informed leaders for classroom teaching, education, administration, counseling, and higher education. Our mission is realized through a framework of teaching, scholarship, and service that addresses regional, state, national, and international perspectives.

Course Description: This 3-unit, lecture/lab course is designed to help you acquire the theoretical framework and skills to function appropriately as an entry-level counselor in a variety of settings. You will **NOT** emerge from the course as a polished psychotherapist, but you will be provided the basic tenets on which many outstanding therapists base their technique. Emphasis is placed on learning and demonstrating the "core conditions" of counseling as defined by the person-centered movement. **This is a Web Enhanced class, using Blackboard for weekly assignments.**

Class Meeting Day/Time/Location:

"Day Timers"		
Day	Time (includes Lab)	Room
Wed	12:00 noon - 2:50 p.m.	ED 55

Instructor Office Hours (ED 441): Tuesday, 9:00 a.m. - 1:00 p.m. (except 2nd and 4th Tuesdays will be 9:00 a.m. - 11:00 a.m. due to a Program Meeting), Wednesday 3:00 p.m. - 5:00 p.m.; Thursday 7:00 p.m. to 8:00 p.m. *if notified you are coming*), others by appointment. I also advise via Skype (email me to set this up). **ALWAYS by e-mail!**

Textbook: Martin, D.G. (2001). Counseling and therapy skills, 2nd Ed. Prospect Heights, IL: Waveland Press.

Behavioral Objectives of this course. The student will ...

- **Evaluate** counselor and consultant characteristics and behaviors that influence helping processes including age, gender, and ethnic differences, verbal and nonverbal behaviors and personal characteristics, orientations, and skills (CACREP II-G5b,f)
- **Demonstrate** a practical understanding of essential interviewing and counseling skills so that the student is able to develop a therapeutic relationship, establish appropriate counseling goals, design intervention strategies, evaluate client outcome, and successfully terminate the counselor-client relationship. Studies will facilitate student self-awareness so that the relationship is therapeutic and the counselor maintains appropriate professional boundaries (CTC 27; CACREP II-G5c,d);

- Examine ethical standards of the American Counseling Association (ACA) and related entities, and demonstrate the ability to apply ethical and legal consideration to the counseling relationship (CTC 6,18; CACREP II-G1f,j);
- Review current literature and practice on the nature of the helping relationship;
- Actively participate in class activities, which includes assuming the role of both counselor and client as requested (CTC 8; CACREP II-G1d);
- Observe peers and offer critique on the appropriateness of their counseling behaviors (CTC 16; CACREP II-G5b);
- Compare and contrast counseling techniques appropriate for various client populations, including multicultural and social equity populations (CTC 3,21; CACREP II-G5d).

Areas of specific mention or focus for COUN 200 ...

- Introduce students to an understanding of the nature and needs of individuals at all developmental levels, their mental wellness/well-being; theories of learning and personality development (CTC 2; CACREP II-G5a);
- Introduce a systems perspective that provides an understanding of family and other systems theories and major models of family-related interventions (CTC 7; CACREP II-G5e);
- Expose students to a rationale for selecting family and other systems theories as appropriate modalities for family assessment and counseling (CTC 7; CACREP II-G5e);
- Discuss a systems perspective that provides an understanding of family and be exposed to a rationale for selecting family and other systems theories as appropriate modalities for family assessment and counseling (CTC 11; CACREP II-G5e);
- Introduce “professional identity” - studies that provide an understanding of the following aspects of professional functioning including history, roles, organizational structures, ethics, standards, and credentialing (CTC 17,18; CACREP II-G1a,b,g);
- Introduce professional organizations, primarily ACA and CAMFT, including membership benefits, activities, services to members, and current emphases (CTC 18, CACREP II-G1f).

Learning the skills: You will have the opportunity to practice the skills taught in role play, classroom exercises, and 1:1 counseling practice. All members of the class will serve both as counselor and client. This class is essentially an experiential process, and you will have to be involved and supportive of each other to maximize the professional

growth opportunities for all. Student counselor-client interactions will be recorded for additional evaluation and study (CTC 31).

Accessories: Our counseling lab has been recently overhauled. The equipment there will require you to acquire a 4GB USB "thumb drive" to record and retrieve your counseling sessions. These drives are inexpensive and readily accessible. Instructions will be provided on the best method to play your sessions on your home or laptop computer.

Dan's Policy on Attendance: In order to learn these skills, you must be present--your attendance is expected. Please call and alert me to any absence prior to class.

University Policy on Students with Disabilities: The University is committed to providing reasonable academic accommodation to students with disabilities. Services for Students with Disabilities provides university academic support services and specialized assistance to students with disabilities. Individuals with physical, perceptual, or learning disabilities as addressed by the Americans with Disabilities Act should contact Services for Students with Disabilities (559-278-2811) for information regarding accommodations. Please notify your instructor so that reasonable efforts can be made to accommodate your needs. **IF YOU EXPECT ACCOMMODATION THROUGH THE ACT, YOU MUST MAKE A FORMAL REQUEST THROUGH SERVICES FOR STUDENTS WITH DISABILITIES.**

University Honor Code: "Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities. You should:

1. understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration);
2. neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading; and
3. take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

It is important that we all do the 'right thing' where exams, papers, and other academic matters are concerned; the university permits your instructor to require students to sign a statement on all exams and assignments that "I have done my own work and have neither

given nor received unauthorized assistance on this work." You'll see this on Exam 1 and the Final Exam.

University Policy on Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a "0" or "F" on a particular assignment, through an "F" for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the "Class Schedule" (Legal Notices on Cheating and Plagiarism) or the "University Catalog" (Policies and Regulations).

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mental health agency or some other urgent service, let your instructor know in advance of each class meeting that you have such responsibilities. : While computers are generally welcome in most classrooms (unless otherwise specified by the instructor), their use is strictly confined to direct educational support for the specific class being attended (note taking, seeking course-related material, etc.). The use of an open computer for activities such as instant messaging, chatting, social networking (myspace, facebook, etc.), shopping, bidding, surfing, e-mailing, etc., are strictly prohibited. **iPods, MP3 players, etc.:** The use of such devices, with the accompanying use of earphones, ear buds, etc., is strictly prohibited. Of course, assistive devices of a similar nature are always welcome; the instructor should be apprised in advance of their presence. Students who are in violation of this policy and have been previously warned are considered to be in violation of the **University Policy on Disruptive Classroom Behavior** and will be subject to disciplinary action.

University Policy on Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live ... Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

Statement on Copyright Policy: Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, see: <http://smith.soehd.csufresno.edu/copyrtpolicyfull.pdf>

Digital Campus course web sites (e.g., Blackboard) contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you 1) do not modify it, 2) use it only for the duration of this course, and 3) include both this notice and any copyright notice originally included with the material. Beyond this

use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the web site.

Professional Content Updates (written assignments): Students are expected to become familiar with journals that relate to counseling techniques and strategies as well as to use their own experiences to improve the teaching-learning process. Three (3) times during the semester students will turn in a journal article, summary, and critique. Articles must come from current, counseling-related journals (“current” will be considered to include the period from 1995 to the present). On the day they are due, the class will discuss findings with the group. It is essential that you are prepared on the day the assignment is due. To complete the assignment, you are to:

1. Submit a copy of the article. Include the specific name of the journal, date, volume, and pages, plus references at the end of the article;
2. Write a brief (1 to 2 page) summary of major points in the article. The top of the page should have a regular bibliographic reference to the article submitted; *and*
3. Critique the article by listing its strengths and limitations (1 page maximum).

This three-part assignment is in lieu of a major paper. Professional Content Updates are due **September 29, October 20, and November 17**. Please, no exceptions; don’t email your critiques and expect me to print them for you. Please bring me a hard copy.

Evaluation: There will be two (2) exams during this course: one during midterm (**Week 10: October 27, 2010**), the other a final examination (**Wednesday, December 15, 2010 from 1:15 p.m. to 3:15 p.m.**). These exams will be on content of counseling, which, unfortunately, has been shown to have little or no correlation with competence as a counselor. The exams will require you to do two things: 1) develop your thoughts regarding selected topics/issues from the text and class discussions; and 2) give appropriate, effective written responses to selected client statements. A procedure for evaluating responses will be presented to you in the early weeks of the course.

Your counseling competence will be determined by a rating procedure designed to discriminate levels of counselor effectiveness, yet it is a highly subjective rating system. Since this is a "skills" oriented class, you will have ample opportunity to learn and hone your basic counseling skills. As in any skill building process, feedback will be frequent and ongoing. Your active participation is the key to success in this area. The following scale will be used to evaluate students in this course:

Course Evaluation Activity (1% = 6 Bb points)	%-Value	Bb Points
Two exams @ 20% (120 Bb each, total 240 Bb)	40%	240
Professional Content Updates @ 5% (30 Bb each, total 90 Bb)	15%	90
Counseling vignettes (10 vignettes at 6 Bb each, total 60 Bb)	10%	60
Counseling Competence *	30%	180
Professional Responsibility **	5%	30
TOTAL FOR CLASS ACTIVITIES	100%	600

Percentage Scale	Blackboard Points Scale
A = 90% - 100%	A = 540 - 600
B = 80% - 89%	B = 480 - 539
C = 70% - 79%	C = 420 - 479
D = 60% - 69%	D = 362 - 419
F = below 60%	F = 000 – 359

* This is, for the most part, a function of professional judgment on the part of your instructor--feedback is essential to keep you feeling comfortable with this method of evaluation.

**Usually this is no problem, and will only be "worth" the value listed. Infractions resulting in personal/emotional injury will increase this weighting. Don't panic, we'll discuss this!

Counselor Ethics: It is expected that you act at all times in a professionally responsible way. This includes attending class, being punctual and prepared, participating actively, and other more subtle forms of desirable behavior. Given the nature of this class--the kind of intimacy that emerges in counseling relationships--all exchanges of personal

information will be handled in the strictest of professional confidence in accordance with the "Ethical Standards" of the American Counseling Association (ACA). This "ethics" document will be distributed and discussed early in the course.

Calendar: A calendar of events is attached. The dates presented thereon are to help us stay on task, and are subject to change in the event of extenuating circumstances. Students are expected to have read material prior to class as they will pertain to the class lectures and open discussion. Exam and assignment dates on the calendar are fixed and will not be moved. Grades will be reduced when assignments are turned in late.

Selected Bibliography:

Brammer, L.M. (1993). The helping relationship: Process and skills (5th ed.). Boston: Allyn & Bacon.

Carkhuff, R.R. (1999). The art of helping in the 21st century. Amherst, MA: Human Resource Development Press.

Corey, M.S. & Corey, G. (2010). Becoming a helper (5th ed.). Pacific Grove, CA: Wadsworth-Brooks/Cole.

Egan, G. (2006). Essentials of skilled helping: Managing problems, developing opportunities. Pacific Grove, CA: Thomson-Brooks/Cole.

Hutchison, D. (2006). The essential counselor: Process, skills, techniques. New York: Houghton Mifflin

Ivey, A.E. & Ivey, M.B. (2010). Essentials of intentional interviewing: Counseling in a multicultural world. Pacific Grove, CA: Thompson-Brooks/Cole.

Ivey, A.E. & Ivey, M.B. (2002). Intentional interviewing and counseling: Facilitating client development (5th ed.). Pacific Grove, CA: Wadsworth-Brooks/Cole.

Okun, B.F. (2002). Effective helping: Interviewing and counseling techniques (6th ed.). Pacific Grove, CA: Brooks/Cole.

CALENDAR OF EVENTS

COUN 200 • Fall, 2010

Class meets on Wednesdays

12:00 p.m. to 3:50 p.m. in ED 55

Week 1: Wednesday, August 25, 2010

Introductions; getting to know you

What is counseling, anyway?

The Core Conditions of Counseling

Tour of Counseling Lab

Use of Internet in counselor training

- **Assignment:** Preface, Martin Chapters 1 & 2

Week 2: Wednesday, September 1, 2010

The Core Conditions of Counseling (continued)

Introduction to the Carkhuff Rating Scale

Basic Skill Pre-Screening Tape

- **Assignment:** Martin Chapters 3, 4, & 13

Week 3: Wednesday, September 8, 2010

Beginning the counseling process

Basic Listening skills

Basic Skill Pre-Screening Tape (continued)

- **Assignment:** Martin Chapter 5
- **Vignettes Posted: AB**

Week 4: Wednesday, September 15, 2010

Basic listening skills

More on the Carkhuff Rating Scale

Skills development with the "vignette tape"

- **Assignment:** Martin Chapters 6 & 9
- **Professional Content Update #1 due next week**
- **Vignettes Posted: CD**

Week 5: Wednesday, September 22, 2010

Dan is at a professional meeting in Wisconsin. **No class today**, but you have assignments and a Professional Content Update due for next meeting.

- **Assignment: Martin Chapters 10 & 11**
- **Vignettes Posted: EF**

Week 6: Wednesday, September 29, 2010

Professional Content Update #1 due

Self-disclosure, Genuineness, Immediacy: The "higher-order skills"

Finish "vignette tape"

"Deanna tape"

Putting the client in charge of her/his life

Rogers tape

Confronting your client

Fishbowl counseling

- **Assignment:** Ethical Standards; Martin Chapter 12

- **Vignettes Posted: GH**

Week 7: Wednesday, October 6, 2010

Perls tape

More on general counseling strategies/techniques

Review of skills

Fishbowl counseling

- **Assignment:** Martin Chapters 14 & 15

- **Vignettes Posted: IJ**

Week 8: Wednesday, October 13, 2010

Ellis tape

More on general counseling strategies/techniques

Review of skills

Fishbowl counseling

- **Assignment:** Ethical Standards (handout)
- **Vignettes Posted:** KL
- **Professional Content Update #2 due next meeting**

Week 9: Wednesday, October 20, 2010

Professional Content Update #2 due

Discussion of "ethics"; Tarasoff, Mandated reporting, Confidentiality

- **Assignment:** Exam Next Week; Martin Chapters 1-6, 9-15; ethics
- **Vignettes Posted:** MN

Week 10: Wednesday, October 27, 2010

Exam. Martin Chapters 1-6, 9-15; ethics

- **Assignment:** Practice your counseling skills.
- **Vignettes Posted:** OP

Week 11: Wednesday, November 3, 2010

More on general counseling strategies/techniques

Review of skills

Fishbowl counseling

- **Assignment:** Practice your counseling skills.
- **Assignment:** Martin Chapters 16 & 17
- **Professional Content Update #3 due next meeting**

- **Vignettes Posted: QR**

Week 12: Wednesday, November 10, 2010

Professional Content Update #3 due

Work in fishbowl or booths

- **Assignment:** Practice your counseling skills.
- **Assignment:** Martin Chapters 7 & 8
- **Vignettes Posted: ST**

Week 13: Wednesday, November 17, 2010

Work in booths

- **Assignment:** Practice your counseling skills.
- **Assignment:** Martin Chapter 18

Week 14: Wednesday, November 24, 2010 -- THANKSGIVING HOLIDAY

- **Assignment:** Practice your counseling skills.

Week 15: Wednesday, December 1, 2010

Work in booths

- **Assignment:** Practice your counseling skills.

Week 16: Wednesday, December 8, 2010 - LAST DAY OF CLASS

Work in booths

- **Assignment:** Practice your counseling skills.
- **Assignment:** Final Exam next week. Martin Chapters 7, 8, & 16-18; ethics

FINAL EXAM SCHEDULE: Wednesday, December 15, 2010 from 1:15 to 3:15 p.m.

FINAL EXAMINATION; Martin Chapters 7, 8, & 16-18; ethics.

Work in booths if necessary!

Syllabus: SPED 120
Introduction to Special Education
Fall 2010



California State University, Fresno
Department of Counseling, Special Education and Rehabilitation
Leadership for Diverse Communities

Syllabus for Special Education (SPED 120)
Introduction to Special Education

Term: Fall, 2010	Instructor Name: Dr. Hong Shen
Units: 3.0 units	Office Number: ED 345
Email: hshen@csufresno.edu	
Tel: 559-278-0289	Office Hours: Monday, Wednesday: 3:00-4:00 p.m. Tuesday 12:00-3:00 p.m.

Course Description

This course provides an introduction to the terminology, identification, and issues commonly encountered when addressing the needs of diverse students with disabilities. Emphasis will be placed on diversity issues, federal and state legislative mandates pertinent to nondiscriminatory assessments, parental involvement and individualized educational plans; and professional practice and foundations in special education. Course addresses the collaborative roles of a multidisciplinary approach to supporting children and youth with disabilities in a diverse society. Assignments include 20 hours of fieldwork. Course will include varied instructional techniques (i.e., lecture, small/large group activities and discussion, issue investigation, debate, role-play, collaborative activities, etc.).

This course is approved by the Liberal Studies Committee as meeting the required standards as part of the blended program in undergraduate teacher preparation, which prepares Multiple Subject candidates by connecting subject matter, and pedagogical studies in a manner that emphasizes quality, depth, rigor and scope. This course adds to the candidates' knowledge of major themes, concepts, principles, and way of knowing of discipline-based studies and of interdisciplinary studies. Students also learn the delivery of content-specific instruction consist with state-adopted content standards for students.

Prerequisites

- Previous or concurrent enrollment in EHD 50 or EHD 115S. This course extends this prerequisite by examining special education and the diverse populations served.
- This course will be web-enhanced. PowerPoint presentations and Internet resources will be provided through Blackboard. The University provides free email accounts to all students. Students may sign up for email online at <http://email.csufresno.edu>. Internet accounts are available for fee at <http://www.fresno.com/cvonline/cvip.html>.

Required Texts and Instructional Materials

- **Text:** Friend, M. (2007). *Special education: Contemporary perspectives for school professionals*. 2nd Edition. Boston: Allyn and Bacon.

Resources

Related Readings

- Anguiano, P. (2001). A first-year teacher's plan to reduce misbehavior in the classroom. *Teaching Exceptional Children*, 33(3), 52-55.
- Armstrong, T. (2000). *Multiple intelligences in the classroom*. Alexandria, VA: ASCD Publications.
- Beirne, Smith, M., Ittenbach, R.F., & Patton, J.R. (2003). *Mental retardation* (6th ed.). Upper Saddle River, NJ: Merrill.
- Bennett, T., & Bruns, D. (1997). Putting inclusion into practice: Perspectives and parents. *Exceptional Children*, 64, 115-131.
- Blosser, J. L., & Niedecker, E.A. (2002). *School programs in Speech-Language Pathology: Organization and service delivery*. Boston: Allyn & Bacon.
- Etscheidt, S., & Bartlett, L. (1999). The IDEA amendments: A four-step approach for determining supplemental aids and services. *Exceptional Children*, 65, 163-174.
- Hoagwood, K., Kelleher, K. J., Feil, M., & Comer, D. M. (2000). Treatment services for children with ADHD: A national perspective. *Journal of American Academy of Child and Adolescent Psychiatry*, 39(2), 198-206.
- Kavale, K.A., & Forness, S.R. (2000). What definitions of learning disability say and don't say: A critical analysis. *Journal of Learning Disabilities*, 33, 239-245.
- Luckasson, R., Coulter, D., Polloway, E.A., Reiss, S., Schalock, R., Snell, M., Spitalnik, D., & Stark, J. (2002). *Mental Retardation: Definition, classification and systems of supports*. Washington, DC: American Association on Mental Retardation.
- Maag, J.W. (2001). Reward by punishment: Reflection on the disuse of positive reinforcement in school. *Exceptional Children*, 67, 173-186.
- Palmer, D.S., Fuller, K., Arora, T., & Nelson, M. (2001). Taking sides: Parent views on inclusion for their children with severe disabilities. *Exceptional Children*, 67, 467-484.

- Stainback, W., Stainback, S., & Stefanich, G. (1996). Learning together in inclusive classrooms. *Teaching Exceptional Children*, 28(3), 14-19.
- Stainback, W., & Stainback, S. (Eds.) (1992). Controversial issues confronting special education: Divergent perspectives. Boston: Allyn & Bacon.
- Tiedt, P.L., & Tiedt, I.M. (1999). *Multicultural teaching: A handbook of activities, information, and resources* (5th ed.). Boston: Allyn and Bacon.
- Yell, M. L., Rogers, D., & Rogers, E. L. (1998). The legal history of special education: What a long, strange trip it's been! *Remedial and Special Education*, 19, 219-228.

Primary Learning Outcomes

Upon completion of this course, the student will exemplify in practice the Kremen School of Education and Human Development's (KSOEHD) broad vision and mission of ethically informed community leaders for classroom teaching, education administration, and/or higher education who advocate for high standards and democratic values with attention to professional ethics and diversity. The KSOEHD Faculty promotes the development of the following candidate professional dispositions across all coursework: Reflection, Critical Thinking, Professional Ethics, Valuing Diversity, Collaboration, and Life-long Learning. Candidates will increasingly reflect these dispositions in their work with students, families, and communities.

1. Discuss the major components of an IFSP/IEP and their processes, as well as the roles of students, families and professionals on the team (Standard 10 & 16).
2. Demonstrate knowledge of current legislation pertaining to students with disabilities and their families, as well as ethical standards related to professional practices in the field (Standard 10 & 11).
3. Discuss significant philosophical and historical aspects of special education, as well as emerging issues, practices and research in the field (Standard 11).
4. Demonstrate awareness of differences and similarities of students with and without disabilities, and the teaching implications of diversity, including culture, language, ethnicity, race, socioeconomic status, gender, religion, and lifestyle orientation factors (Standard 12 and LS Standard 8).
5. Complete 20 hours of contact with students with disabilities in a school, community, or leisure/community setting (Standard 13).
6. Maintain direct contacts with individuals with disabilities, their teachers and families and demonstrate an ability to integrate theory into practice (Standard 13).
7. Demonstrate awareness of effective communication strategies with parents from diverse backgrounds and professionals from other disciplines and community useful for those working with exceptional students (Standard 16 and LS Standard 8).
8. Discuss formal and informal assessment in academic and nonacademic areas and how information is used for identification and to plan for individual needs (Standard 17).
9. Demonstrate knowledge of a variety of disabilities including etiologies, characteristics, specialized physical health care procedures and regulations related to such care, educational and social impact, educational approaches and available resources (Standard 12; Standard 15; Mild)
10. Demonstrate knowledge concerning movement, mobility, sensory, and health care needs for learners to participate in schools and community (Standard 27: Severe).

University Policies

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in Madden Library 1049 (278-2811).

Honor Code: “Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities.” You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an

unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by

misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for

the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class." Cell phones should be turned off before the class begins.

Copyright Policy: Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its copyright web page:

<http://www.csufresno.edu/library/libraryinformation/campus/copyright/copyrtpolicyfull.pdf>

For copyright Questions & Answers:

<http://www.csufresno.edu/library/libraryinformation/campus/copyright/faqcopyright.pdf>

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re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the website.

Course Requirements:

1. **Attendance:** Because of the participatory nature of the course, topic presentations and student discussion, attendance is essential. Please be on time and stay until the end of class. More than one absence, excessive lates or leaving early will affect your grade.
2. Student absences will be authorized only when the student has a serious and compelling medical condition that she/he can support with documentation or when a death or serious illness in the **immediate** family (i.e., parents, spouse or child) prevents attending class. The student is responsible for contacting the instructor as soon as possible after the missed class period and for

providing documentation of the reasons for the absence upon returning to class. Failing to provide documentation will lead to an absence.

3. Taking this web-enhanced course you need to learn how to use Blackboard program.

If you need information about Blackboard, do this:

1. Connect to the Internet
2. Start a browser.
3. Go to the following URL: <http://blackboard.csufresno.edu/>
4. Bookmark this URL for later use.
5. Click the Login button
6. Type in your Fresno State email username and password

Important: Be sure to get a Blackboard Student Orientation before taking this course.

For information on how to use various Blackboard tools, you can access the Blackboard Student Organization. To do this:

Click on the "Organizations" on the Blackboard main page <http://blackboard.csufresno.edu>

To get Technical Support:

The instructor of this course is not responsible for answering technical questions regarding the Blackboard and your computer.

For general computer/internet/e-mail problems, call the Help Desk 559-278-7000

For Blackboard problems, contact digital campus: digitalcampus@listserv.csufresno.edu

3. Weekly class lectures and quizzes

Each week you are responsible for reading chapters in the textbook and course materials in the modules on the Blackboard. Power Point presentations, chapter summaries, external readings, web links and quizzes in the modules can help you understand content of this class better. You can find all the modules in the **Course Document** folder on the Blackboard. You are required to complete online quizzes after reading each chapter. After you submit your answers, the Blackboard will compute a score. **It is important to note that you have to complete the online quizzes before due dates in the weeks when the chapter readings are assigned. If you pass**

due dates, the quizzes will not be available online again. You will have one hour to complete a quiz, but you can take the quiz only once. Once you take the quiz, the same quiz will not be available to you on the blackboard. The due dates of the quizzes are in the end course syllabus. However, you are not advised to take a quiz without a careful reading of a chapter.

Course Assignments*

**Confidentiality:* The privacy and identity of children and their families should be protected at all times. Do not use the student's or the family's real name. Use pseudonyms to discuss the student or family. When speaking or writing about a student or family, use *Student X* or *Family X*. Do not discuss specific details of your observations or discussions with professionals with anyone. It is the law!

1. Written assignments

Field Experience Requirement:

To take this course, you are required to have a 20 hour field experience. You will need this experience to complete course assignments. Select a public, private or residential facility serving individual with disabilities (e.g., learning handicapped (LH), physically handicapped (PH), and /or severely handicapped (SH). A general education classroom is acceptable if there are students with disabilities. Documentation of this field experience is to be completed on a department form.

To take this course, you are required to complete two written projects. These assignments must be completed by the due dates, however, you are welcome to work ahead of the schedule at your own pace. All assignments must be neatly word processed (Microsoft Word Format) and free of punctuation and spelling errors. Late paper will be penalized 5 points for each day following the due date. **Assignments will be only accepted for one week following the date unless prior arrangements with instructor have been made.**

Project One: Interview (50 Points) **Candidate Dispositions Addressed: Valuing Diversity, Collaboration, Critical Thinking, and Reflection.**

Interview with /about persons with disabilities. Your paper must be typed, one and half spaced (font 12 or 10) and no more than 8 pages. Some of the individuals who may be interviewed include:

- Parent of child with a disability

- Special education teacher
 - Occupational therapist
 - Physical therapist
 - Speech pathologist
 - Special education coordinator in one of the school districts
 - Principal
 - Group home staff or residential facility staff
-
- School psychologist/Social worker
 - Individual with disabilities

You paper should include three parts: (1) introduction (2) interview questions and answers, and (3) your personal reaction to the interview. **Important: the second part must be a script of the interview in question-and-answer format.**

The introduction provides information about the interviewee (e.g. personal information about the interviewee, interviewee's background, language, communication style, date and location of the interview conducted, etc). In the second part, you are required to ask **at least 20 questions** during the interview. Prepare for the questions before the interview and script the interview in question-and-answer format after the interview. In the third section, describe your personal reactions to the information learned through the interview. (i.e., What did you learn from the interview? What is your attitude towards disabilities? How do you think of special education? etc.). The following are some sample questions

1. Please describe the degree to which you have contact with individuals with disabilities.
2. To what extent does your relationship or contact with individuals with disabilities differ from your relationship or contact with individuals without disabilities?
3. Please describe the services you provide to persons with disabilities. (Please describe the services you must obtain for your daughter or son).
4. Please describe the degree to which you rely on information provided by a teacher or special education teacher in order to better perform your role or provide a specific service to individuals with disabilities.
5. What advice do you have for someone who is studying to be a teacher of individuals with disabilities? etc.

6. What do you expect general education teacher to do for students with disabilities ?
7. What is the impact of disability on your personal/family life?
8. How do you think of inclusion?
9. What do you expect from the community to help individuals with disabilities?

Project Two: Site Report (50 points) Candidate Dispositions Addressed: Reflection, Critical Thinking, Collaboration, Professional Ethics, Valuing Diversity.

Arrange to observe a student in a special education program for students with disabilities in the local area. This student must be school aged (3 -21) and have been identified as a child with a disability (learning disability, autism, behavior disorder, mental retardation etc.) Prior to the visitation you are responsible for obtaining the permission of the principle and/or teacher to visit

the program. As the observer, you should arrange a short period following the visit to ask questions and make comments. This should not be carried out while the class is in session.

Following the visitation/observation provide all the information requested below. Attempt to make comments which are objective and derived from observation or the review of the data.

In your paper type the following headings first. For example, under the heading: **Describe the school you observe (Name of program, address, director/principal, special education teacher, general education teacher, occupational /speech therapist, etc.), you wrote a paragraph.**

Important: Your description must be specific and provide detail information. Give examples if necessary. Your paper must be one and half spaced (font 12 or 10) and no more than 6 pages.

1. Describe the school you observe (Name of program, address, director/principal, special education teacher, general education teacher, occupational /speech therapist, etc.). Describe the school's culture, students' language, ethnicity, socioeconomic status in general
2. Describe the classroom (Number of teachers/aides and their training, number of students (male and female), ages, and exceptionalities, room arrangement, equipment, materials, schedule for the day.,

3. Describe the lesson you observed.
4. Describe the student you observed:
 - Hypothetical name, age, sex, ethnicity, exceptionality.
 - Appearance (apparent physical disabilities, general appearance)
 - Behavior (active, shy, etc.)
 - Responsiveness (attentive, impulsive, etc)
 - Motivation (eager, indifferent, etc.)
 - Motility (wheelchair, balanced, etc.)
 - Verbalization (talkative, nonverbal, etc)
 - Student's strengths and weaknesses
5. Describe the types of special education and related service(s) the student received.
6. Describe the interactions of the student has with teachers, assistants, peers or others (Give specific examples).
7. Was there evidence of specific guideline for the student behavior (Give specific examples) ?
8. Do you feel student is appropriately labeled (exceptionality) and placed (program) to meet his/her needs? Why?
9. What is your attitudes towards students with disabilities?
10. What is your attitudes towards inclusion?
11. What would do if you were the student's general education teacher?
12. What would do if you were the student's special education teacher?

Exam (50 points): Candidate Dispositions Addressed: Critical Thinking, Professional Ethics.

One exam will be given in the final week. The exam will include false/true and multiple choice questions.

Summary of Points/Grade Distribution

Participation (Discussion Board)	160 points
Field Experience	20 points
Site Report	50 points
Interview	50 points
Module quizzes	150 points
Presentation	40 points
Exam	50 points
Total Points	520 points

Grading Range: A = 90%--100%, B = 80%--89%, C = 70%--79%

Grading

The total points received on each assignment are recorded in the grade roster.

Grades are calculated by percentage (the total points received divided by the total points possible).

Percentages: 100-90% = A; 89-80% = B; 79-70% = C, 69-60% = D; 59%-0 = F.

Tentative Course Schedule

This schedule is subject to change in the event of extenuating circumstances.

<i>Week</i>	<i>Date</i>	<i>Topic</i>	<i>Reading Due</i>	<i>Assignment</i>
1	8/25	Introduction to course	Syllabus	

		Getting to know Blackboard		
2	9/01	Key concepts for Understanding Special Education	Ch. 1	Read Module 1 Read Chapter 1 Take Quiz 1 Due Date:9/01 @11:00 p.m.
3	9/08	Special Education Staff & Procedures	Ch. 2	Read Module 2 Read Chapter 2 Take Quiz 2 Due Date:9/08@11:00 p.m.
4	9/15	Multicultural and Bilingual Perspectives/IEP Collaboration	Ch. 3, 4	Read Module 3, 4 Read Chapter 3, 4 Take Quiz 3, 4 Due Date 9/15@11:00 p.m.
5	9/22	Learning Disabilities	Ch. 5	Read Module 5 Read Chapter 5 Take Quiz 5 Due Date: 9/22@11:00 p.m.
6	9/29	Attention Deficit Hyperactivity Disorder	Ch. 6	Read Chapter 6 Read Module 6 Take Quiz 6 Submit Project 1 #1 Interview Due Date:9/29@11:00 p.m.
7	10/06	Emotional and Behavioral Disorders	Ch. 7	Read Module 7

				Read Chapter 7 Take Quiz 7 Due Date:10/06@11:00 p.m.
8	10/13	Mental Retardation/ Speech and Language Disorders	Ch. 8, 9	Read Module 8,9 Read Chapter 8,9 Take Quiz 8,9 Due Date:10/13@11:00 p.m.
9	10/20	Deafness and Hearing Loss/Visual Impairment	Ch. 10, 11	Read Module 10,11 Read Chapter 10, 11 Take Quiz 10, 11 Submit Project 2 Due Date: 10/20@11:00 p.m.
10	10/27	Autism Spectrum Disorders	Ch. 12	Read Module 12 Read Chapter 12 Take Quiz 12 Due Date: 10/27@11:00 p.m.
11	11/03	Physical and Health Impairments/ Severe/Multiple Disabilities	Ch. 13, 14	Read Module 13, 14 Read Chapter 13,14 Take Quiz 13, 14 Due Date: 11/03@11:00 p.m.
12	11/10	Gifted and Talented Review	Ch. 15	Read Module 15 Read Chapter 15 Take Quiz 15 Due Date:11/10@11:00 p.m.
13	11/17	Topic Presentation		

14	12/01	Topic Presentation		
15	12/08	Topic Presentation		
16	12/15	Final Exam		

Syllabus: NURS 136

Health Appraisal

Fall 2010

CALIFORNIA STATE UNIVERSITY, FRESNO
DEPARTMENT OF NURSING



DR. F. NDIDI UCHE GRIFFIN
EdD, FNP-C, MSN, PHN
Professor of Nursing

MISSION STATEMENT:

Health Appraisal, NURS 136, is designed to instruct undergraduate and graduate students with a basic knowledge of human anatomy and physiology. Working through the steps of history taking and physical examination, students completing this course, are prepare to identify problem symptoms and abnormal findings throughout the life span in diverse populations; link these findings to and underlying process of pathophysiology or psychopathology; and establish and test a set of explanatory hypotheses.

VISION STATEMENT:

At the completion of this course, students working through the steps of history taking, physical examination, analysis of findings, and evaluation will recognize the multifaceted profile of the clients before them. Graduates of this course will also come to recognize that these learned skills that allow assessment of all patients also shape the image of the unique human beings entrusted to their care.

COURSE OBJECTIVES

Upon completion of the course the student will be able to:

1. Collect a comprehensive health history which reflects an understanding of the client's ethnicity, culture, environment, lifestyle and age which influence the client's state of health and potential for disease.
2. Perform a systematic physical examination applying techniques of inspection, palpation, percussion and auscultation.
3. Show a beginning ability to use specialized tools such as otoscope, ophthalmoscope and reflex hammer.
4. Make appropriate adaptation in the physical examination based on the client's age, degree of bio-psycho-social discomfort and current state of health.
5. Record the findings in the SOAP and problem-oriented formats using appropriate medical and nursing terminology.
6. Analyze a data base for significant clues to alterations in health and the presence of disease.

7. Develop an initial plan for health maintenance, health promotion and disease prevention in collaboration with the client, family and other health care providers.

REQUIRED TEXTS

Required: *Bates' Guide to Physical Examination and History Taking*, 10th Edition

Recommended: *Bates' Pocket Guide to Physical Examination and History Taking*, 6th Edition

READING REQUIREMENTS:

Self-directed reading in topic areas designated in the course syllabus is to be based on each student's self-identified need (s). In addition to the topic areas, the reading of student handouts and instructor lecture materials is highly recommended.

GRADING CRITERIA:

A=90-100% B=80-89% C= 70-79% D=60-69% F=59% and below

450-500 Pts 400-449 Pts, 350-399 Pts, 300-349 Pts, 299-Points

ASSIGNMENTS:

<u>Assignment</u>	<u>Points</u>	<u>Weight</u>
Written History	100	20%
Written Physical	100	20%
Midterm Examination	100	20%
Final Physical Examination	100	20%
Final Written Examination (comprehensive)	100	20%
<u>Total</u>	500	100 %

Please note: Under **no** circumstances will late assignments be accepted. Without exception examinations will take place on the dates designated.

REQUIRED EQUIPMENT

Blood pressure cuff	Snellen eye chart (near vision card)
Stethoscope	Tuning fork (128 Hz and 256 Hz)
Penlight	Otoscope/ophthalmoscope; optional
Clear plastic ruler (6 inches)	Reflex hammer

SUGGESTED READING LIST

Weeks 1 and 2:	Chapter 1– Overview: Physical Examination and History Taking
	Chapter 2 – Clinical Reasoning, Assessment, and Recording Your Findings
	Chapter 3 – Interviewing and the Health History
Week 3:	Chapter 4 – Beginning the Physical Examination: General Survey, Vital Signs, and Pain
	Chapter 6 – The Skin, Hair, and Nails
Week 4:	Chapter 7 – The Head and Neck

Week 5:	Chapter 8 – The Thorax and Lungs
	Chapter 9 – The Cardiovascular System
Week 6:	Chapter 11 – The Abdomen
Week 7:	Chapter 12 – The Peripheral Vascular System
Week 8:	Chapter 16 – The Musculoskeletal System
Week 9:	Chapter 5 – Mental Status and Behavior
	Chapter 17 – The Nervous System
Week 10:	Chapter 10 – The Breasts and Axillae
	Chapter 14 – Female Genitalia
Week 11:	Chapter 13 – Male Genitalia and Hernias
	Chapter 15 – The Anus, Rectum, and Prostate

ASSIGNMENTS DETAILS AND EXAMS:

Nursing History: (100 points) - Due Week 3

Complete a thorough face-to-face interview of your lab partner.

Record hand-written information on the form titled "Nursing History" located in your syllabus.

- Choose a partner to work with. You will interview each other for the health history and you will also work together in skills practice sessions and on the final observed physical assessment. Worksheet for history taking is in workbook.
- When you are being interviewed by a classmate during the health history, try not to volunteer information too readily.
- Develop a preliminary problem list based on the information given in the health history. Example on formulation of a problem list will be given in class.
- You will use the information collected in the health history to formulate a one-page SOAP note. Guidelines will be given in class for this process.

Mid-term Physical Examination: (100 points)

- Conduct a complete head-to-waist physical examination of your lab partner. (Breasts are not included in this exam).
- You will have 30-minutes to complete the exam.
- A check-off exam sheet can be located in your syllabus.

Final Physical Examination: (100 points)

- Conduct a head-to-toe physical examination of your lab partner. (Pelvic not included)
You will have 40-minutes to complete the exam.

- Systems to Cover:

Introduces self, hand hygiene

_____ Takes appropriate history: CC, HPI, PMHx, FmHx, P/SHx, ROS

_____ Uses equipment appropriately

_____ Explains procedure

_____ Proceeds in logical order

_____ Summarizes appropriately

Head and Neck: (CC: headache, stiff neck, thyroid problem)

_____ Inspects and palpates scalp

_____ Inspects and palpates neck for thyroid

_____ Palpates for lymph nodes

_____ Palpates trachea

_____ Checks range of motion

_____ Palpates and percusses sinuses

Eyes (CC: vision changes, red eyes, trauma)

_____ Checks vision

_____ Inspects conjunctiva/sclera, cornea, lens

_____ Checks pupil reaction

_____ Checks EOM

_____ Uses ophthalmoscope correctly

_____ Elicits red reflex

Abdomen (CC: abdominal pain, diarrhea, constipation, mass)

_____ Drapes correctly

_____ Inspects for contour and lesions

_____ Auscultates prior to palpation

_____ Perform light palpation prior to deep palpation

_____ Palpates all 4 quadrants

_____ Palpates for liver and spleen

CV (CC: chest pain, planning to start exercise program)

- _____ Drapes correctly
- _____ Inspects thorax
- _____ Auscultates all listening areas in at least 2 positions
- _____ Palpates for apical impulse and thrills
- _____ Palpates peripheral pulses

Muscle (Injury, stiffness, backache)

- _____ Compares sides throughout exam
- _____ Inspects for posture and gait
- _____ Evaluates ROM of major joints
- _____ Evaluates strength of major muscle groups
- _____ Checks spinal curvatures including check for scoliosis

A check-off exam sheet can be located in your syllabus.

Laboratory Assignments: (100 points-10 assignments worth 10 points each)

- Following lecture and physical examination demonstration, conduct a physical examination of your lab partner.
- Record your findings on the lab sheets provided for each system examined.
- Turn these lab sheets in at the completion of your final head-to-toe physical examination.

Comprehensive Final Examination: (100 points)

- At the designated time, access and complete the final comprehensive written examination on Blackboard.
- Each question will be randomly displayed one at a time.

- Answer the question at the time of viewing as you will not be able to go back to a question.
- This is a 90 minute examination.
- Submit examination upon completion.

Syllabus: NURS 180T

Physical Assessment for School Nurses

Summer 2010

Physical Assessment for School Nurses

SUMMER 2010

Course Number: Nursing 180T (Nursing 136)
Course Title: Physical Assessment for School Nurses
Units: 3 Units
Prerequisites: Permission of Instructor
Faculty: Terea Giannetta RN, MSN, CPNP
Phone # (559) 434-3718 Home
(559) 353-5460 Clinic
Email: tereag@csufresno.edu

Catalog Description:

Health appraisal integrates psychosocial and pathophysiological processes, which includes techniques of history taking and health assessment in nursing practice and knowledge of normal findings and common deviations.

Learning Objectives:

On completion of the course student will be able to:

1. Collect a comprehensive health history for clients, which reflect an understanding of factors such as heredity, culture, ethnicity, lifestyle and environment, which may influence the client's state of health and potential for disease.
2. Perform a systematic physical examination applying techniques of inspection, palpation, auscultation and percussion.
3. Show a beginning ability to use specialized tools such as the otoscope, ophthalmoscope, and reflex hammer.
4. Make appropriate adaptations in the data collection format based on the client's age, degree of discomfort, and current state of health.
5. Record the findings in the problem-oriented medical record format using appropriate medical terminology.
6. Analyze a data base for significant clues to alterations in health and/or presence of disease.
7. Develop an initial plan for health maintenance, health promotion and disease prevention in collaboration with the client/family and/or other health care providers.

Learning Activities:

The class is divided into lecture and activities sessions.

Lecture portion: Lecture, videos, directed readings, and lab manual assignments

Clinical portion: Practice, return demonstrations, health histories & physical assessment.

Grading Criteria:

A-90-100% B-80-89% C-70-79% D-60-69%

NOTE: Students are expected to be familiar with the statement on academic dishonesty in the University Catalogue.

Assignments:

ASSIGNMENT	% OF GRADE	PTS. POSS.
1. Health history	15%	15
2. SOAP note	15%	15
3. PE write-up	20%	20
4. Clinical activity	20%	20
5. Observed Assessment	30%	30

REQUIRED TEXTS: BOTH MUST BE PURCHASED TO PASS COURSE

Jarvis, Carolyn. "Physical Examination and Health Assessment". 5th Edition. 2008. Saunders Elsevier.

Jarvis, Carolyn. "Student Laboratory Manual. Jarvis Physical Examination and Health Assessment". 5th Edition. 2008. Saunders Elsevier.

Textbook Acquisition Options:

1. Purchase on upper level of CSUF bookstore.
2. Or order from any on line textbook source such as Amazon, Target etc.

N 180 T COURSE CALENDAR

<i>DATE</i>	<i>TIME</i>	TOPIC	ACTIVITY	ASSIGNMENT
Friday July 16	5-6 pm	Introduction to Course	Review Syllabus	Orientation to Class
	6-7 pm	Interviewing, History	Video	Jarvis Ch. 1, 2, 3, 4, 5, 6, 7
	7-7:30	Taking, genogram development	Lecture	Worksheet for Hx taking p. 33-40
	7:30-10		History taking with peer	
Saturday July 17	8-10 am 10-12	Recording, SOAP notes Clinical Exam, Assessment Techniques	Introduction to Skills Lab, Equipment	Jarvis, Ch. 8, 9, 10, 11
	12-1pm Lunch 1-2 pm	Skin, hair, nails	Video- skills Practice. Work in lab manual	Jarvis, Ch. 12 Clinical Activity P. 103-104
	2-5 pm	Head, face, neck (thyroid & lymph system)	Video, skills practice Write SOAP note cc: "rash on arm x 3d"	Jarvis, Ch. 13 Clinical Activity P. 115
Sunday July 18	8-11:30 am 11:30 Lunch 12:30-4 pm	Eyes, Ears, Nose, Throat	Videos, skills practice Skills practice contd. Complete Hx on peer	Jarvis, Ch. 14, 15, 16 Clinical Activity P. 127, 137, 147 SOAP DUE!

Friday <u>July 30</u> 5-10 pm	Thorax/ Lungs Heart, Vessels Cardio-Respiratory	Videos Videos, review murmur Audiotapes	Jarvis, Ch. 17, 18, 19, 20 Clinical Activity P. 171, 195-196
Saturday, July 31 8-11:30 11:30 Lunch 12:30-2 pm 2-3 pm 3-5pm	Abdomen Musculoskeletal Neurological	Skills practice Video, skills practice Video, skills practice PE on peer	Clinical Activity P. 209-210 Jarvis, Ch. 21, Lab Jarvis, Ch. 22, 23 P. 219-221, 235-236
Sunday, August 1 8-11 am 11-12 Lunch 12-5 pm	Exam infant, child, adolescent, preg, adult, & elderly Observed Hx/PE	Video, skills practice	Jarvis, Ch. 27 Hx/PE write up on peer due P. 33-40, 277-281

Please see note on next page re: class calendar information

Class Calendar – NOTE: Dear Students: Minimal time for reading and assignments will be allowed in class. Prior reading and assignment completions by students is recommended since some homework is expected in all university classes and the time frame of the class is very short. However the faculty recognize that this will be more of a learn-as –you-go course, and I believe that more learning occurs in a stress free environment. The Jarvis text is very readable and student friendly, as are the clinical activity assignments. Since students will have a partner of their choice during the classes, it is acceptable to do the review questions together. Students might want to read several Jarvis chapters in the weeks prior to the first day of class. This will allow more time to practice skills or to catch up on the next day's reading. Some chapters could be read on the two weeks of break. There will be no written exam or formal papers required in the course, and there will be minimal lecturing due to the use of videos, skills practice and lab manual assignments. Please bring your own stethoscopes, and otoscope/ ophthalmoscope instruments if you have them. We do have equipment available. The class should be fun, so just relax and enjoy it. Assessment of the genitalia and the pregnant client will not be covered in this class due to time constraints, but these topics are covered in Jarvis. The usual format of the class will be as follows: classroom videos and/ or lecture for each system, students working in pairs in the skills lab to practice skills learned in that session, and back to the classroom to read and do clinical activity assignments.

Note: Instructors reserve the right to make necessary course changes due to unforeseen circumstances.

N180 T

Unknown Demo-Observed

ALL Exams: introduces self, hand hygiene

_____ Takes appropriate history: CC, HPI, PMHx, FmHx, P/SHx, ROS

_____ Uses equipment appropriately

_____ Explains procedure

_____ Proceeds in logical order

_____ Summarizes appropriately

Head and Neck: (CC: headache, stiff neck, thyroid problem)

_____ Inspects and palpates scalp

_____ Inspects and palpates neck for thyroid

_____ Palpates for lymph nodes

_____ Palpates trachea

_____ Checks range of motion

_____ Palpates and percusses sinuses

Eyes (CC: vision changes, red eyes, trauma)

_____ Checks vision

_____ Inspects conjunctiva/sclera, cornea, lens

_____ Checks pupil reaction

_____ Checks EOM

_____ Uses ophthalmoscope correctly

_____ Elicits red reflex

Abdomen (CC: abdominal pain, diarrhea, constipation, mass)

_____ Drapes correctly

_____ Inspects for contour and lesions

- _____ Auscultates prior to palpation
- _____ Perform light palpation prior to deep palpation
- _____ Palpates all 4 quadrants
- _____ Palpates for liver and spleen

CV (CC: chest pain, planning to start exercise program)

- _____ Drapes correctly
- _____ Inspects thorax
- _____ Auscultates all listening areas in at least 2 positions
- _____ Palpates for apical impulse and thrills
- _____ Palpates peripheral pulses

Musc (Injury, stiffness, backache)

- _____ Compares sides throughout exam
- _____ Inspects for posture and gait
- _____ Evaluates ROM of major joints
- _____ Evaluates strength of major muscle groups
- _____ Checks spinal curvatures including check for scoliosis

GUIDELINES AND GRADING CRITERIA FOR ASSIGNMENTS

ASSIGNMENT DETAILS

HEALTH HISTORY (15 points) and SOAP NOTE (15 points)

1. Choose a partner to work with. You will interview each other for the health history and you will also work together in skills practice sessions and on the final observed physical assessment. Worksheet for history taking is in workbook.
2. When you are being interviewed by a classmate during the health history, try not to volunteer information too readily.
3. Develop a preliminary problem list based on the information given in the health history. Example on formulation of a problem list will be given in class.
4. You will use the information collected in the health history to formulate a one-page SOAP note due Sunday July 18. Guidelines will be given in class for this process.

CLINICAL ACTIVITY ASSIGNMENTS (20 Points possible)

10 Clinical activities will be handed out in class for completion during the practice session and turned in at the end of that class day.

OBSERVED ASSESSMENT SKILLS RETURN DEMONSTRATION (30 points possible)

Scheduled time will be set-aside for student to do an observed Hx / exam on an unknown problem. Working in pairs, each will choose 1 of 5 potential problems, take appropriate Hx, do appropriate PE and briefly summarize findings.

WRITE-UP OF PHYSICAL ASSESSMENT (20 points possible)

1. Continue with the same person you used for your history.
2. Collect an interval history. (Any changes since your initial history, 1 page max)
3. Follow the guidelines on physical exam documentation that is in the Jarvis text, chapter 27, page 277-281 in the student manual.

Develop a short problem list based on the history and physical exam. Develop a preliminary plan for any current problems. A one sentence plan is sufficient for each problem identified. This write-up will be turned in at the end of class.

Syllabus: NURS 137

Teaching Strategies for the Health Care Client

Fall 2010

Course No: N137 – Teaching Strategies
for the Health Care Client

Kathryn DeFede RN MSN PHN

Units: 3 (three)

Office Number: MH 219

Prerequisites: upper division status

Email: kdefede@csufresno.edu

Grading: Letter (A,B,C,D,F)

Telephone: 559/273-8120

Office hours: by appointment

Catalog Description:

Exploration of the nurse's role as a teacher in the health care setting. Principles of teaching and learning applied to teaching of individuals and groups. Opportunities for on-line presentation, interactive class assignments and group work. Blackboard (Bb) will be used for content and delivery of the course.

Purpose

The purpose of the course is to develop teaching strategies and apply learning theories to multi-complex and multicultural individuals and groups in the health care setting and community.

Course Objectives:

Learning Outcomes - Upon completion of the course the student should be able to:

1. Describe their learning style by utilizing the VARK survey. Describe it's usefulness with patients and individuals in their practice.
2. Assess and describe challenges in web-based learning and proper etiquette when utilizing the internet as it relates to communication and discussion in a classroom setting.

3. Describe the teaching role of the nurse within the context of their current role and or health care setting. Describe how patient teaching is affected and shaped by the current health care trends/demands.
4. Identify health teaching needs and strategies utilizing the nursing process and the Neuman Health Systems Model.
5. Apply educational and social cognitive theories (e.g., teaching and learning motivation, social learning theory) and health promotion theories and models (e.g., Health Belief Model, Transtheoretical Model) to an individual case study.
6. Assess and develop a proposal for a Health Education Plan that can be implemented in their place of work.
7. Research and present a barrier to learning common in their area of work. Develop a specific teaching plan that can be used in their work place that incorporates strategies to overcome the barriers of choice.
8. Identify teaching strategies and instructional design methods that have been tested and found to be most effective in adult instruction.
9. Identify their own personal cultural competency and assess their workplace for cultural competence and compare literature regarding cultural competence in the work place.
10. Compare and contrast research related to cultural communities in health care.

Goals of the Course

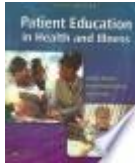
The goals of the course are to introduce students to:

1. Patient education in clinical practice
2. Health promotion; models and applications to patient education
3. Integration of cultural systems and beliefs
4. Educational theories for teaching and motivating patients
5. Staff development in patient education
6. Community health promotion: assessment and intervention
7. Assessment, planning, educational interventions and evaluation of patient education
8. Patient education resources on the internet

What You Need to Purchase

Required Text

Rankin, S. & Stallings, K., London, F. (2005). *Patient education: In Health and Illness* (5th ed.). Philadelphia, PA: Lippincott Publishing Co.



Note: Students will be required to submit all assignments in accordance with the most current edition of the APA Manual. Secondary resources related to citation format may be less than accurate and *should not* be utilized.

Required Materials:

N137 Module: Provides weekly assignments and due date. This document provides specific directions for activities and posting of on-line materials for the course.

N137 – Course Schedule- **See Weekly Module for detailed assignments**

Wk	Date	Topic	Assignment
1 & 2	August 25th Web based	Weekly module #1 and #2 Getting to know you Course introduction & review of syllabus	• Tour of course • Introductions of students • Web search activities • Group assignments by instructor Chapters 1 and 10 in text
3	Sept 8 th Web-based	Integration of Cultural Systems and Beliefs Group work begins	• Review responses to web search activities • First week of group work (5 assignments total) Chapter 3 in text
4	Sept 15 th	Barriers to Learning	• First week for Barrier to Learning (BTL) presentations

	Web-based		Chapters 2 & 5
5	Sept 22 th Web-based	Community Education Planning Barriers to Learning	• First Health Education Plan (HEP) work • Group work #2 Chapters 4, 6 and review Chapter 1 for informed consent
6	Sept 20 th Web-based	Barriers to Learning, teaching strategies and learning theories	• Review the BTLs posted for this week.
7	Oct 6 th Web-based	Assessment and Planning in Patient Education	• Review last weeks responses to group work • Rent and watch video of choice <i>Precious</i> or <i>Where the Heart Is</i> • HEP work • Group work #3 Chapters 7, 6, 13 in text Review literacy article in course documents under Weekly module #7
8	Oct 13 th Web-based	Barriers to Learning, teaching strategies and learning theories	• Review the BTLs posted for this week
9	Oct 20 th Web-based	Keys to Adult Learning	• Group work #4 Chapters 8 in text
10	Oct 27 th Web-based	Barriers to Learning, teaching strategies and learning theories	• Review the BTLs posted for this week
11	Nov 3rd	Neuman's System Model	• Group Work #5

	Web-based		External links: Neuman's System Theory
12	Nov 10 th Web-based	Neuman's System Model and the Community	• Read and respond to the BTLs for this week • HEP Neuman Theory Application External Links: Neuman's System Theory
13	Nov 13 th Web-based	Poverty as a culture	• Refer to module for specific assignment
	No Class	Thanksgiving Break	No assignment
14	Dec 1 st Web-based	Questions and answer week for HEP assignments	
15	Dec 8 th	Last day of instruction: HEP due by 5pm	
	Finals week December 13-16	<i>Final Examination</i> – Final Available on line December 13 th -16 th	

This syllabus and schedule are subject to change in the event of extenuating circumstances. If you are absent from class, it is your responsibility to check announcements made while you were absent.

Evaluation Methods and Grading Criteria

The final grade for Nursing 137 will be derived from the following:

1. Barrier to Learning Presentation (BTL)	100	33%
2. Health Education Plan	100	33%
3. Participation	80	27%
4. <u>Final</u>	20	7%
<i>Total Points/Percentage</i>	<i>300</i>	<i>100%</i>

Grading Scale:

Grade	Points	Percentage
A	268.5 - 300	89.5 – 100
B	238.5 - 268.4	79.5 – 89.4
C	208.5 - 238.4	69.5 – 79.4
D	178.5 - 208.4	59.5 – 69.4
F	below 178.4	below 59.4

Group/Student Participation (80 pts.)

It is essential that all students participate via Blackboard (Bb) in this course. The students in the course are Generic nursing students, ADN-BSN articulate students and School Nurse credential students. The experiences of the students in the course should be shared to broaden the learning experience for all. As health care continues to change, roles, programs and teaching strategies do as well, and we should share our ideas and experiences. All discussion on blackboard is confidential and will not leave the classroom real or virtual.

This area is weighed heavily because all of the course work is conducted on-line and all other assignments cannot be completed or obtained without student participation: Student participation will be active in the following: Group work, reviewing student presentations, responses to presentations, health education plan submissions and review, instructor/student interaction

Points for participation will be given through the group work submitted in group forums. Each group has the opportunity to receive up to 50 points for group participation. The remaining 30 points will be distributed through other interactive course work the student participates in. A Bb statistical analysis of each student's active participation will be evaluated to determine that student has logged in and interacted in the course.

Health Education Proposal (HEP) (100pts.)

The HEP is built into the course assignments: review module for specific HEP instructions. HEP example is provided in the HEP forums.

The purpose of the Health Education Proposal is to provide the student the opportunity to look broadly at health education. The student is encouraged to design a proposal that would be appropriate for the current health issues and educational needs of their area. This proposal should be well structured so the student could implement this plan if the opportunity presented itself. The proposal will be a topic of the student's choice based on literature review, interest, and experiences. It is preferred that the student is chose a current project in their current place of work that they could build on or assist with for this assignment. This assignment is meant to be something that can be used in the student's work place.

The research and writing of this proposal is built in the weekly assignments. The student will be asked questions about their proposal through-out the semester so the instructor can review and offer feedback and direction. This is also open for other students to review and share ideas. The paper will then be put together in APA format by the student and submitted by the due date.

The student will submit the final HEP in the assignment section of the course. It will be graded through the grade book and feedback can then be given.

The paper itself should be presented in APA format and in an organized, easy/quick to read style. Use bullet points and subtitles to organize. Please do not present in a lengthy narrative form. (20pts)

The proposal will include the following: Note: **Review chapters 6, 12 and 13 for helpful tools and information**

Assessment (20pts)

This section the background should be evaluated through research and talking with key individuals in the community and in the students work environment.

1. Introduction

- Focus group- group plan is focused on
- Whom will the plan benefit

2. Background on the problem:

- What is the need that prompted the plan based on research or your personal experience?
- What issue is the plan attempting to improve upon?

3. Research to support the problem statistics

- Current data from students place of work and literature review that supports the need. You will want to include your current work statistics if applicable and describe the environment of your work place..ie..ethnic breakdown, barriers, economic status.

Planning (20pts)

1. Short-term goal:

- What initial outcome would you expect to see

2. Desired long-term goal:(within 2 years would like to see....)

3. Learning theory and rationale:

- What learning theory would be appropriate for this group and why? Use your text here for help and referencing.
- You must identify a learning theory from the text or literature and apply it to your plan

4. Neuman's Theory Application:

- Describe how Neuman's can be applied to your HEP in a brief explanation.

Implementation (20pts)

1. Teaching strategies of choice and rationale:

- Identify a specific teaching strategy from the text or literature.
- Why is this a good strategy for focus group and provide literature to support it. Use your text here for help

2. Resource/key people you identified

- Who are the people you identify to assist within the focus groups community
- Who are the people in your work environment and/or community that are key to your proposal

3. Setting education plan will take place:

- Where is this plan to be presented and where are you going to implement your plan to your focus group

Evaluation (20pts)

1. Evaluation-

- How will you evaluate the effectiveness of your plan, how will you measure specific goals/objectives.

Barriers to Learning Presentation and Individual Teaching Plan (100 pts)

The purpose of this presentation is to provide each student with an opportunity to research and assesses barriers to learning that they come in contact with and how best to deal with those barriers when teaching clients. The student is to choose a specific learning barrier of their choice. Examples are: illiteracy, ADHD, children or adults with special medical needs that makes learning difficult, developmental delay issues. The student will research the barrier of choice for information on the barrier to include background, significant statistics as well as strategies used for teaching to facilitate learning. This assignment will be posted on Blackboard on the date the student assigned by the instructor.

Each week **ALL** students will review the presentation submitted and submits one critical thinking question to the student about the presentation. The student who presented must respond to at least three of the questions they believe to be most important. If the student wished to respond to more they may.

It is very important that this presentation be a presentation related to the facts. Avoid a lengthy narrative. Organize the paper to facilitate quick reading and understanding. Something other students could use as a reference in their work place. Remember you will be reading 2 to 3 of these per week and lengthy papers are hard on the eyes and can be discouraging to read. Failure to follow this format could result in a loss of points for the assignment.

Presentation will include the following: (1 page including references) do not go over please

This assignment has two parts:

Part 1 (50pts)

1. Background/history of the learning barrier:
 - What has your personal experience been with this barrier to learning and what does research say about it.
2. Statistics to support the significance of the problem with learning barrier: research statistics
3. Specific strategies to facilitate learning that the students can use in practice:
 - List the strategies to assist with facilitating learning.

- You will want to use references here to support the appropriateness of your strategy for the learning barrier.
- Learning theories can also be used here to support your strategy.

Part 2 (50pts)

Teaching Plan following barrier to learning summary

The student will now take the strategies to overcome the barrier and design an individual teaching plan to incorporate the newly learned strategies. The student is **strongly encouraged** to design this teaching plan they can implement with an individual they may be working with currently.

This presentation will include following: **(2 pages including references)**

1. Individual of focus: confidential (initials only) who will receive the teaching
2. Assessment gathered by the student supporting the need for the teaching (refer to ch. 7 pg 160 box 7-2)
3. Evidence of learner readiness: How does the student know the individual is ready to “hear” this information? (refer to ch. 8 pgs. 192-195 and ch. 9 pg. 218)
4. What three objectives do you hope to accomplish with this teaching: write in measureable terms- remember care plans? Are these realistic for the learner or is it only what you think they should learn? (refer to ch. 8 pg 202-209)
5. Teaching methods and Rationale: implement your barriers to learning strategies here (refer to ch. 9 pg 218-220)
6. Learning or motivational theory that applies to your case study
7. Visual aides or handouts you might use
8. Evaluation of the persons learning: How would you evaluate their learning based on the above objectives? If you have the opportunity to teach the plan what was the result? (refer to ch. 11 pg 291-301)
9. Evaluation of your teaching effectiveness? If able to conduct the teaching, what would you change next time? What did you like that worked well

- Student should keep papers within the suggested length. Posting lengthy presentations and papers on-line can be discouraging to read and overwhelming to other students. Lengthy documents can also increase the time spend due to downloading of the documents and moving from area to area within the course. Due to the large nature of reading on-line, the student's grade may be penalized for going over the suggested paper length.

Final Comprehensive Exam (20 points)

There will be a 20 question multiple choice/ True and False comprehensive final exam. The exam will be on Bb and will be easy for the student to access. There will be a time limit for the exam to be determined by the instructor prior to the final exam. The students will be given a study guide to assist in their preparation. The best way for the student to prepare for the final exam is to participate in the course. Participating in the BTL's, group work and text readings will assist in the preparation for the exam. Exam questions will be based on BTL presentations, text readings.

Course Delivery

- The syllabus and all weekly lecture PowerPoint presentations are posted on Blackboard (Bb). Call 278-6892 or 278-7373 if you have problems related to Bb. Digital Campus office is located in IT 300. Website is <http://blackboard.csufresno.edu>
- The announcement section of Bb will be used to inform students of any changes in coursework or updates for the class.
- Students are able to check their scores on Bb grade book.
- The details of weekly assignments is provided in the weekly module accessible to the students on Bb.

This is an official communication from California State University, Fresno. It is your responsibility to maintain the security and integrity of your e-mail account. Always choose a secure password and do not share that password with anyone. If you have questions regarding the security of your e-mail account, please contact the Help Desk at 559.278.7000 or help.csufresno.edu. If you receive a personal notification from the university, login to [My Fresno State](#) and click on "Student Portfolio" for your current status.

Netiquette

Policy regarding on-line conduct: It is expected and understood that information either personal or professional discussed in the Blackboard arena be kept confidential and not used in a negative fashion either verbally or over Blackboard. Professional conduct, support and respect for someone's views will be expected. If you have questions or problems you may reach the instructor via internet, phone or office visit.

Course Policies

- Students are expected to notify the faculty on the first day of class if any of the course prerequisites have not been completed.
- Students are expected to complete the required assignments and readings in preparation for weekly quiz or assignment. It is also suggested that additional references to augment knowledge in the various subject areas be utilized.
- Lateness Policy: Failure to meet the deadlines related to the written assignments or papers will result in a deduction of 2 points per day.

University Policies

Students with Disabilities

Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in Madden Library 1049 (278-2811).

Honor Code

"Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a. Understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- b. Take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.
- c. Instructors may require students to sign a statement at the end of exams and assignments that "I have done my own work and have neither given nor received unauthorized assistance on this work." Alternatively, you may also require the students to sign a single statement for your course such as "I am aware of the CSU Fresno Honor Code. I will do my own work and neither give nor receive unauthorized assistance on work for this course."

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations.

However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work.”

Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Schedule of Courses (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations)

Computers: “At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience.

Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www/csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources.”

Disruptive Classroom Behavior: “The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class.”

Copyright policy

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<http://www.csufresno.edu/library/about/policies/docs/copyrtpolicyfull.pdf>

Plan Ahead

Students should start planning ahead for the following activities that will be done in class. Due to the fast pace nature of the class, students should plan on working on the following:

- Identify a barrier to learning you encounter in your daily work environment. Be prepared to research this barrier and identify some strategies to assist your clients in the learning process despite the barrier to learning.
- Identification of a Health Education Plan topic. What is going on at work? This should be something you can implement at work and be a useful plan for you.
- Renting a movie- Look ahead in some video rental stores. Do they carry *Where the Heart Is*? Or *Precious*? Make sure you have access to one of those movies.

Challenging the Course/ Credit by examination (not apply to summer session students)

This course may be challenged via a written comprehensive examination.

- The student must enroll for credit by examination by the second week of class.
- Applications for credit by exam must be completed by the student and approved by the nursing department.
- The exam is administered by the fourth week of instruction and the grade is reported by the instructor prior to the close of the sixth week.
- If the student passes the exam they are given a (CR) credit grade.
- If they are unsuccessful, no grade is reported. See the current catalog for further information under credit by examination.
- Student must also be enrolled and participating in another 3 unit course to be eligible to enroll in CBE for this course.

Students who would benefit from challenging the course are generally students who have been a practicing RN for a minimum of 3-5 years and: (may have one or more of the following)

1. Holds a Masters or Bachelors degree and/or previous coursework included course on patient education or education principles.
2. Holds or has held a teaching specific role with patients/families or multi-complex patients for 2 or more years.
3. Holds or has held a clinical role where teaching patients/families was 90% of their role.
4. Has completed a similar course successfully and provides the transcript and catalog course description.

If you believe you are a candidate for credit by exam, please contact your instructor by email before the first meeting.

Syllabus: NURS 183

Vision and Scoliosis in the School Setting

Summer 2011

California State University, Fresno
Department of Nursing
Graduate Program
School Nurse Services Credential Program

VISION AND SCOLIOSIS SCREENING IN THE SCHOOL SETTING

Course Number:	NURS 183
Course Title:	Vision and Scoliosis Screening in the School Setting
Units:	One (1), 15 hours
Placement in Curriculum	Prior to <u>NURS 184</u>
Prerequisite:	School Nurse Services Preliminary Credential
Semester:	Summer 2011 – On CSUF campus
Faculty:	Patricia Gomes RN, BSN, MaEd Mary Smith RN, PHN, MSN, FNP

CATALOG DESCRIPTION:

Guidelines for conducting state mandated vision and scoliosis screening in the school setting, application of current research and nursing theory, as well as guidelines for screening for Acanthosis Nigricans (prediabetes II indicator).

PG/11-2010

COURSE OBJECTIVES / LEARNING OUTCOMES:

On completion of this course, the student will be able to:

1. Define current state mandates regarding scoliosis, vision and diabetes II screening in schools.
2. Describe normal anatomy and physiology, and apply principles of growth and development to school screenings for scoliosis and vision.
3. Develop a plan for set up, implementation, completion, and follow-up on state mandated scoliosis and vision screenings including mandated California State reporting.
4. Recognize the difference between normal and abnormal findings on vision and scoliosis screenings and pre diabetes type II screening.
5. Discuss the current research findings on the value of vision and scoliosis screenings and pre diabetes type II screening.
6. Demonstrate the ability to complete scoliosis and vision screening and pre diabetes type II screening utilizing nursing process and skills.

COURSE REQUIREMENTS:

To qualify for this course, students must be:

- 1) Enrollment in California State University, Fresno School Nurse Credential Program; or be in possession of a preliminary or valid professional clear California School Nurse Services Credential.
- 2) Hold a valid California license as a registered nurse

COURSE PLAN:

Teaching methodology will include lecture, discussion, skill practice, article review and written post evaluation. Students are expected to participate in class discussion with contributions relevant to course content.

REQUIRED READING PRIOR TO CLASSROOM OBSERVATION EXPERIENCES:

Students are expected to download and familiarize themselves with these manuals prior to class (minimum 1 hour).

California Department of Education. (2007). *Standards for scoliosis screening in California public schools*. Manual is available online at <http://www.cde.ca.gov/Is/he/hn/documents/scoliosisscreening.pdf>.

California Department of Education. (2005). *A Guide for Vision Testing in California Public Schools*. Manual is available online at <http://www.cde.ca.gov/Is/he/hn/documents/visionresport.pdf> and may be downloaded.

Various articles on vision, scoliosis and acanthosis nigricans (pre diabetes type II) screening from professional nursing journals such as *The Journal of School Nursing (NASN)*.

GRADING CRITERIA:

This course is structured as a typical nursing continuing education course. Class attendance, reading classroom materials, discussion and participation, skill practice, article review and reporting along with completion of a written post-test are each worth a percentage of a student's grade.

GRADE POINTS:

A = 90 to 100	B = 80 to 89	<u>C = 70 to 79</u>	D = 60 to 69	F = 59 and below

COURSE ASSIGNMENTS:

Assignment	Points	Wt.
Completion of required reading of vision and scoliosis Manuals prior to course	10	10%
Skill Session Vision Testing Practice	15	15%
Discussion Vision Screening set-up, implementation, follow-up.	15	15%
Skill Session Scoliosis Assessment Practice	15	15%
Discussion Scoliosis Screening Setup, implementation, follow-up	15	15%
Summery Review of Vision, Scoliosis or Acanthosis Nigricans Journal Articles	20	20%
Satisfactory completion of post test and evaluation	10	10%
Total	100	100%

TO ACCOMPLISH COURSE OBJECTIVES:

Required reading prior to classroom observation experiences. Students are expected to read through the California Department of Education. (2007) *Standards for Scoliosis Screening in California Public Schools* and the California Department of Education. (2005). *A Guide for Vision Testing in California Public Schools* to gain insight into components of a Coordinated School Screening Program for Mandated Vision and Scoliosis Screening in Public Schools.

In addition course outline and activities include:

1. **Define current state mandates:** Students will learn current California State Mandates regarding scoliosis, vision and diabetes type II screening in schools and discuss implementation in their districts.
2. **Develop a plan for the implementation of screening programs in their districts:** For each of the above screenings students will discuss and develop a plan for setting up, implementation, completion and follow-up on state mandated scoliosis and vision screenings.
3. **Skill review and practice:** Students will practice elements of vision and scoliosis tests and develop comprehensive vision and scoliosis assessment skills through repeat practice.

4. **Journal Review and reporting:** Students will review articles from various professional journals on vision testing, scoliosis screening and diabetes type II assessment and discuss in class to become aware of current ideas and future goals.
5. **Evaluation:** Students will review mandates and apply new skills to current practice via a written post evaluation and discussion
6. **A final grade of Credit or No Credit** will be posted in PeopleSoft at the end of the scheduled class.

NURSING 180T VISION AND SCOLIOSIS SCREENING

SKILL ASSESSMENT CHECKOFF

SCOLIOSIS ASSESSMENT-ADAMS FORWARD BEND TEST

Skill	Complete	Signature
Front Standing View • Head centered • Shoulders even • Body Space at waist even • Hips even • Knees level		
Side View Standing • Round back • Sway back		
Back View Standing • Head centered • Shoulders even • Scapulae level • Spine appears straight • Body space at waist even • Waist and Hips Even • Waist body space even • Knees creases even		
Back View Forward Bend • Head centered • Shoulders even • Scapulae prominence • Spine straight/level • Waist and Hips even		
Side View Forward Bend		

• Uneven contours of back • Accentuated midline hump • Abnormal posture		
Front View Forward Bend • Uneven contours on one side		
Leg Length Discrepancy • Standing and sitting		
Rescreening and Referral • Criteria for rescreening • Recording of data • Parent notification • Physician Referral		
Referral Programs/Options		

NURSING 180T VISION AND SCOLIOSIS SCREENING
SKILL ASSESSMENT CHECKOFF

VISION TESTING SKILLS CHECK OFF SHEET

Skill	Complete	Signature
PERL-Anisocoria		
Tracking/EOM		
Red Light Reflex		
Cover/Uncover Test		
Hirschberg (Corneal Light Reflex)		
Vision Acuity-Optotype-Distance • Snellen-Letter Lea/HOTV Charts • Hand Charts • Symbol-Picture Charts • Blackbird • “E” Charts		
Vision Acuity-Near Vision • Hyperopia Testing		
Color Vision Screening		

Depth Perception testing		
Functional Vision Exams • Alternative testing		
Rescreening and Referral • Criteria for Vision Rescreening • Criteria for Vision Referral • Recording of data • Parent notification • Physician Referral		
Referral Programs/Options		

PRE-DIABETES SCREENING

<i>SKILL</i>	<i>COMPLETE</i>	<i>INCOMPLETE</i>
Acanthosis Nigricans Marker		
Referral Criteria		

UNIVERSITY POLICY STATEMENTS

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Syllabus: NURS 184

Introduction to School Nursing

Fall 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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B. Miller-7/10

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(Note: Syllabus page numbers do not correspond with this Program Assessment Document)

**CALIFORNIA STATE UNIVERSITY FRESNO
DEPARTMENT OF NURSING**

Course Number: Nursing 184
Course Title: Introduction to School Nursing
Units: 3 (3 hours/week)

Prerequisites: Admission into the School Nurse Credential Program
NURS 136 – Health Appraisal (Within past 10 years)
NURS 137 – Teaching Strategies
CDDS 125 - Audiology and Audiometry for School Nurses
COUN 174 or COUN 200
SPED 120 – Introduction to Special Education
(Or equivalent course work with Program Coordinator approval).

Faculty: Beverly Miller, RN, BSN, MPA/HS
Office: McLane Hall, Room 288
Office hours: Mon., Wed 9:30 A.M. - 4:30 P.M, Sat. 9:30-12:30
Phone: (559) 278-6252
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Nancy Busch, RN, MA Ed.
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E-mail: nbusch@csufresno.edu (preferred)

Candy Hilvers, RN, MSN, PNP, NCSN
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E-mail: chilvers@csufresno.edu

CSU Fresno Dept. of Nursing
2345 E. San Ramon Avenue, M/S MH 25
Fresno, CA 93740- 8031
Phone: (559) 278-2041
FAX: (559) 278-6360

Revised 7/10-bmm

Catalog Description:

Role of the nurse in the school health program; parameters of school health practice, legal guidelines, professional accountability, coordinated school health programs, health education, and multifaceted health needs of a complex multicultural school aged population. (Online)

N184 COURSE NAVIGATION

Note: To take this course, students must be computer literate, have access to a reliable computer with internet access, and have a CSUF email address. Students coming into the program have different levels of school nursing knowledge and experiences. For this reason students are given the opportunity to gear much of their learning experience to their own unique needs through choice of assignments and selection of weekly questions to research. See assignment details in this syllabus.

N184 CALENDAR OF EVENTS AND ASSIGNMENT DUE DATES

Date	Fall Semester 2010
Orientation Day Saturday 8/14/10	Location: McLane Hall, between 7:45 A.M. and 3:30 P.M. <i>NURS 184 Activities on Orientation Day:</i> 1) Completed Pre-Phase II Knowledgebase Assessment Questionnaire is to be turned in today. 2) Course content and assignment details covered in faculty presentation; 3) Selection of a week during the semester in which assigned partners will give a Blackboard presentation; 4) Partners will select a question specific to that week on which to base their presentation; 5) Get Acquainted Luncheon, University Vintage Room Restaurant, 12:30 to 1:55 P.M. 6) Hands-on Blackboard orientation following luncheon.
Monday 8/23/10	First day of class

Due Dates	ASSIGNMENTS
Monday 9/20/10 Wks 1-4	<u>Module I:</u> Scheduled subject matter for Module 1, see page 5 * Response to 1 weekly research question for each of the following weeks - 1, 2, 3, 4 * Respond to scenarios following 2 Bb presentations for each week - 1, 2, 3, 4 * <i>Philosophy of School Nursing Paper</i>
Monday 10/18/10 Wks 5-8	<u>Module II:</u> Scheduled subject matter for Module 2, see pages 5-6 * Response to 1 weekly research question for each of the following weeks - 5, 6, 7, 8 * Respond to scenarios following 2 Bb presentations for each week - 5, 6, 7, 8 * <i>School Board Meeting Paper.</i>
Monday 11/15/10 Wks 9-12	<u>Module III:</u> Scheduled subject matter for Module 3, see page 6 * Response to 1 wkly research question for each of the following weeks - 9, 10, 11, 12 * Responses to scenarios following 2 Bb presentations for each week - 9, 10, 11, 12 * <i>Cultural Differences Paper.</i>
11/22 – 11/26	<i>Thanksgiving Week</i>
Monday 12/13/10 Wks 13-15	<u>Module IV:</u> Scheduled subject matter for Module 4, see page 6 * Response to 1 weekly research question for each of the following weeks - 13, 14, 15 * Responses to scenarios following 2 Bb presentations for each week - 13,14, 15
Week as Assigned	One week during the semester partners will be responsible for doing a presentation on the Blackboard Discussion Board. The week will be determined on Orientation Day.

Note: Completed assignments are to be sent using 'Assignment Drop Off' in Blackboard "Assignments" section unless otherwise indicated. Student work will be reviewed by instructor, points posted in the student online grade book, and instructor comments will be posted in the Assignment Drop Off section provided for that purpose. Module assignments are due the Monday following the last week of each module period. Work will be considered late after a four day grace period. After the grace period, 10% per week will be deducted for Module I, II, III. Following the Module IV grace period, 10% per DAY will be deducted. (Details on p. 16).

SCHEDULED COURSE CONTENT, FALL 2010

Module One, August 23 – September 17, 2010

Philosophy of School Nursing * History and Current Events * Nurse Practice Act *
Scope and Standards of School Nurse Practice * Legal Guidelines * Nursing Theories *
District Organization * Coordinated School Health Programs * School Nurse Calendar *

District Health Services * Management Process * Dimensions and Interventions

Week 1, 8/23/10-8/27/10:

Philosophy of school nursing; history, current issues, and future trends; the Nursing Practice Act; transitioning into school nursing; theoretical basis for practice, professional organizations; school community and district organizational structure; standards of practice; licensure and certification.

Week 2, 8/30/10-9/3/10:

Coordinated school health programs and role of the school nurse; the nursing process in the education setting, evidenced based practice, rights to health services and the legal system, Neuman Systems Model, other nursing models/theories; school nursing on student performance.

Week 3, 9/6/10-9/10/10:

Federal and state statutory laws that relate to school nursing practice; HIPAA/FERPA, elements of a lawsuit; position statements; sound documentation; Standards of Professional Performance; role of health clerks in the school setting; state law/codes; school district policy.

Week 4, 9/13/10-9/17/10:

School health models; School Nurse Conceptual Framework, Standard 16, program management; concept of administration, management and leadership; conflict management skills; employee job satisfaction; primary, secondary, and tertiary intervention in school nursing practice.

Module Two, September 20 - October 15, 2010

Adaptation in School Population * Safe and Healthy School Environment *
Medications * School Readiness * Mandated Screening Programs * Migrant Health
Issues * Injuries * Acute and Chronic Health Problems * Communicable Disease

Week 5, 9/20/10-9/24/10:

Disease prevention through immunization; Child Health and Disability Prevention program; preschool readiness; Standards of Professional Performance, Standard 14; school site safety; keeping children with food allergies safe; medication administration in schools; training UAPs.

Week 6, 9/27/10-10/1/10:

Outcome identification in school nursing practice; role of the school nurse in screening programs based on CCR and Ed. Code; assessment of growth and development and BMI; identifying barrier to a healthy life style for children; physical assessment skills for the school nurse.

Week 7, 10/4/10-10/8/10:

Community collaboration; School Health Index; helping students and families cope with stress; issues related to bullying, cultural competence; children of migrants/refugees families; school nutrition services; dental hygiene programs; physical assessment skills for the school nurse.

Week 8, 10/11/10-10/15/10:

The role of the school nurse in managing health care issues and related emergencies; First Aid; chronic health conditions such as asthma, diabetes I, Sickle Cell Disease; pediculosis control in the school setting; communicable disease prevention; and tuberculosis screening programs.

Module Three, October 18 - November 12, 2010

The Nursing Process * NANDA Nursing Diagnosis * Individual Health Care Plans *
Health Promotion * Health Education Programs * Cultural Differences * Poverty and
Dysfunctional Families * Learning Disabilities * Child Abuse * IDEA * 504 Plans *

Week 9, 10/18/10-10/22/10:

The Nursing Process; NANDA Nursing Diagnosis and standardized language; Individual Health Care Plans, Emergency Action Plans; caring for children with ADHD, cycle of childhood obesity; seizures, Cystic Fibrosis, Diabetes I, Allergic Rhinitis, Encopresis, Sickle Cell Disease.

Week 10, 10/25/10-10/29/10:

Health education, a component of coordinated school health system; conceptual model for health

teaching and learner readiness; National standards and CA health framework; developing health education programs; family and community involvement; health promotion for faculty and staff.

Week 11, 11/1/10:-11/5/10:

Anxiety disorders and behavior issues: Tourette syndrome, children with autism, school phobia and absenteeism; poverty and homelessness; children of dysfunctional families; cultural competence; transcultural differences; gifted children; child abuse reporting.

Week 12, 11/8/10-11/12/10:

Office of Civil Rights; IDEA and other laws that protecting rights of individuals with disabilities; Student Study Team; 504 Plans; health conditions that impact learning, ADHD, vision and hearing problems, severe allergies, acting out and other behavior.

Module Four, November 15 – December 10, 2010

Special Education * IEP Process * Interdisciplinary Collaboration * Legal and Ethical Issues * Confidentiality * Special Ed. Screening and Assessment * Early Intervention * Specialized Physical Health Care * Supervision of Care

Week 13, 11/15/10-11/19/10:

Special education, IEP (Individual Education Program) process; the IEP team and interdisciplinary collaboration; Individual Health and Support Plans; SELPA (Special Education Local Planning Area); mainstreaming; families and the grieving process.

Week 14, 11/29/10-12/3/10:

Standard 12, Ethics; ethical theories; ethical decision making and problem solving; foster children in the system; early childhood assessment and intervention; IFSP (Individual Family Service Plans); SDC teachers and school staff perceptions of the school nurse role.

Week 15, 12/6/10-12/10/10:

Terminology that qualifies students for services; chronically ill and medically fragile children; special physical health care needs; supervision and training of UAPs; DNAR (Do not attempt to resuscitate); infectious disease control in medically fragile population; program placement.

COURSE OBJECTIVES/LEARNING OUTCOMES

Key: SN = School Nurse or School Nursing

Upon completion of this course the student will be able to:

1. Discuss the evolution of school nursing, current issues, and professional growth.

2. Determine the current role/function of the school nurse and potential conflicts.
3. Relate school nursing to the Nurse Practice Act and NASN standards of practice.
4. Develop a personal philosophy of school nursing based upon theory, standards of care, values and beliefs.
5. Discuss the educational setting, current issues, and problems facing schools today.
6. Discuss the dynamics of district organization and district funding sources.
7. Discuss legal guidelines and school policies as they relate to school nursing.
8. Discuss the Neuman Systems Model and two other theories related to students, families, and community that aid school nurses in their practice.
9. Delineate organizational and time management skills needed by the school nurse in planning a school year.
10. Discuss the components of a coordinated school health program and the school nurse's role in its implementation.
11. Delineate the role of the school nurse in various school settings, i.e. regular education, preschool, special education.
12. Discuss the collaborative role of the school nurse with regard to IDEA (Individuals with Disabilities Education Act) and the educational placement process.
13. Discuss the nursing process in caring for students with chronic disease, those with special needs, and emergency situations.
14. Discuss the role of the school nurse as health program manager in the school setting.
15. Analyze the group process, dynamics, and value of health promotion/education.
16. Discuss the role of the school nurse in the community setting.
17. Discuss cultural diversity, dysfunctional families, and poverty in context of the current health problems encountered in school nursing practice.
18. Discuss contemporary health/social concerns pertinent to the elementary school age population and their families.
19. Discuss state mandated screening programs and organizing school wide screening.
20. Apply conceptual frameworks and current research in the presentation of a pertinent school health problem/topic.

MODULE OBJECTIVES – LEARNING OUTCOMES

Module One

Philosophy of School Nursing * History and Current Events * Nurse Practice Act *
Scope and Standards of School Nurse Practice * Legal Guidelines * Nursing Theories *
District Organization * Coordinated School Health Programs * School Nurse Calendar *

District Health Services * Management Process * Dimensions and Interventions *
Professional Development and Professional Organizations

On completion of this module, the student should be able to:

1. Discuss historical basis for SN, it's evolution and current issues.
2. Discuss the application of the Nurse Practice Act to school nursing.
3. Discuss importance of professional development and value of SN organizations.
4. Discuss the dynamics of district organization and various funding sources.
5. Discuss Standards of SN Practice, their application, and give three examples.
6. Identify components of Neuman Systems Model most easily utilized in SN practice and at least two other models/frameworks useful to SN practice.
7. Discuss what is involved in a coordinated school health program.
8. Discuss purpose of legal guidelines for school nursing practice and accountability.
9. Differentiate between role of school nurse and nurse practitioner in the school setting.
10. Identify key components in planning for the school nurse's school year.
11. Discuss CSNO/NASN position statements and three examples to use in SN practice.
12. Discuss value of research in SN, and cite significance of three research articles.
13. Develop and write a personal philosophy of school nursing.
14. Relate Standards of SN Practice to effective management of a school health program.
15. Discuss the role of the school nurse in a coordinated school health program.

Module Two

Adaptation in School Population * Safe and Healthy School Environment *
Medication * School Readiness * Mandated Screening Programs * Migrant Health
Issues * Injuries * Acute and Chronic Health Programs * Communicable Disease

On completion of this module, the student should be able to:

1. Discuss issues related to adaptation in the school population.
2. Identify three environmental safety hazards in the school setting and the role of the SN.

3. Discuss purpose of school policies and key issues to consider in their formulation.
4. List at least three areas of concern with regard to confidential record keeping.
5. Discuss laws relating to confidentiality, access, and record keeping.
6. Discuss growth and development as it relates to school readiness, including immunization requirements, for preschooler and kindergarten admission.
7. Outline a plan for giving medication at school and in-servicing office staff demonstrating knowledge of Ed. Codes that apply.
8. Discuss mandated screening requirements and Ed. Codes that apply.
9. Discuss other screening programs, i.e., CHDP (Child Health and Disability Program), dental and nutrition assessment.
10. Describe at least three chronic health conditions common to school age children and the role of the SN in case management.
11. Describe at least three serious injuries among school age children and the role of the SN.
12. Discuss the SN role in communicable disease control in the school setting.
13. Describe what is involved in an emergency action plan, i.e., an injury or asthma, other.
14. Discuss steps to take in planning and organizing a school wide screening program.
15. Discuss health and educational issues among migrant children and role of the SN.

Module Three

The Nursing Process * NANDA Nursing Diagnosis * Individual Health Care Plans *
Health Promotion * Health Education Programs * Cultural Differences * Poverty and
Dysfunctional Families * Learning Disabilities * Child Abuse * IDEA * 504 Plans

On completion of this module, the student should be able to:

1. Describe the steps involved in the nursing process.
2. Discuss the value of NANDA Nursing diagnosis for the school nurse setting.
3. Describe what is involved in writing up an Individual Health Care Plan and why.
4. Discuss application of appropriate theory as bases for decision making in SN practice.
5. Describe a learning disability, signs and symptoms, and discuss role of the SN.
6. Identify health issues associated with special needs children, children of poverty.
7. Discuss the value and purpose of the *Health Framework for California Schools*.
8. Discuss age appropriate topics/teaching strategies for classroom presentations, needs assessment and evaluation.
9. Discuss health education/appropriate in-service for faculty and staff.
10. Recognize characteristics of dysfunctional families and the role of the SN.
11. Discuss implications of cultural influences on health care beliefs and practices.
12. Identify risk factors and characteristics of resiliency, based on current research.
13. Discuss the role of the school nurse as advocate for children and families.

14. Discuss IDEA (Individuals with Disabilities Education Act) and its benefits to students.
15. Describe the steps in developing a 504 plan and the role of the school nurse.

Module Four

Special Education * IEP Process * Interdisciplinary Collaboration * Legal and Ethical Issues * Confidentiality * Special Ed. Screening and Assessment * Early Intervention * Specialized Physical Health Care * Supervision of Care

On completion of this module, the student should be able to:

1. Discuss a SELPA (Special Education Local Planning Area) and how Special Education programs are funded.
2. Discuss the difference between RSP (Resource Specialist Program) and SDC (Special Day Class), and list at least 4 different types of SDC programs.
3. Describe the SN role on the SST (Student Study Team), how students are identified for assessment and the steps and timelines leading up to an IEP meeting.
4. Demonstrate knowledge of inter-professional collaboration by discussing role of the IEP (Individual Education Plan) team members, team goals and objectives.
5. Demonstrate knowledge of an IHSP (Individual Health and Support Plan), legal issues and role of the school nurse.
6. Describe appropriate assessment tools/forms in evaluation of a child for possible placement in a special ed. program.
7. Discuss purpose and value of the QNST (Quick Neurological Screening Test) or other types of neurological screening tools used by the school nurse.
8. Discuss role of the school nurse in preschool assessment.
9. List three community agencies that work with special needs children, 0 to 3 years.
10. Demonstrate knowledge of where laws are located that relate to special education.
11. Discuss legal and ethical issues related to children with special needs, i.e. DNAR (Do Not Attempt to Resuscitate).
12. Discuss three specialized physical health care procedures carried out in schools.
13. Discuss problems/steps in delegation of specialized physical healthcare.
14. Discuss infectious disease control issues and control in the special education setting.
15. Discuss mainstreaming/full inclusion of special needs children in the school setting.

TEACHING STRATEGIES

Students will write responses to weekly research questions which require reading textbooks, journal articles, other relevant materials, and website searches; develop and present a presentation on Blackboard for classmates, participation in class discussion followed Blackboard presentations, with monitoring and input from instructor; and completion of other written assignments relevant to school nursing practice.

READING REQUIRMENTS

Reading will be from textbooks, journals articles, lecture notes related to assignments, websites and other reliable sources relevant to course objectives and student learning needs.

GRADING CRITERIA

A = 90-100%	B=80-89%	C= 70-79%	D= 60-69%	F= 59% and below

Note: Selected weekly readings, such as articles and other relevant reading materials, other than textbooks and publications students are asked to purchase, will be available online through the CSUF Madden Library Electronic Reserve. This reference material can be accessed through Blackboard and printed out as needed.

REQUIRED TEXTS AND OTHER PUBLICATIONS

Miller, B. (2010). *Nursing 184 Syllabus*. Fresno, CA: CSUF, School Nurse Services Credential Program: Author. (CSUF/KBS approx. cost \$3.00)

Miller, B. (2010). *Nursing 184 Weekly Questions booklet*. Fresno, CA: CSUF, School Nurse Services Credential Program: Author. (CSUF/KBS approx. cost: \$6.00)

California Department of Education. (2003). *Health framework for California public schools*.

Sacramento, CA: Author. (Approx. cost: \$20.00) (Free online at www.CDE.ca.gov)

California School Nurse Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools, part I (CD version only)* (CSNO cost 25.00 members/\$30.00 non-members)

California School Nurses Organization (2007). *Role of the school nurse and health clerk*.

Sacramento, CA: Author. (CSNO cost \$13.20 members/\$18.70 non-members)

Fadiman, Anne. (1997). *The spirit catches you and you fall down: A Hmong child, her American doctors, and the collision of two cultures*. NY: Noonday Press, Farrar, Straus, and Giroux. (KBS Approx. cost \$15.00, KBS, Borders, other)

Marx, E. & Wooley, S. F. (1998). *Health is academic: A guide to coordinated school health programs*. New York, NY: Teachers College Press. (CSUF/KBS, Approx. cost \$29.00)

**National Association of School Nurses. (2005). *Scope and standards of professional school nursing practice*. Scarborough, ME: Author. (NASN, \$15.00 members/non-members, \$20.00)

**National Association of School Nurses. (2004). *Using nursing languages in school nursing practice*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)

Selekman, Janice. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Company. (CSUF/KBS, approx. cost \$75.00.

NURS 184 RECOMMENDED TEXTS AND OTHER PUBLICATIONS
(Optional only, not required)

National Association of School Nurses. (2007). *Disaster preparedness: Guidelines for school nurses*. Scarborough, ME: Author. (NASN cost \$25.00 members/\$35.00 non-members)

National Association of School Nurses (1998). *Guidelines for school nursing documentation: Standards, issues, and models*. Scarborough, ME: Author. (NASN, \$22.00 members/\$33.00 non-members).

National Association of School Nurses. (2007/2008) *NANDA's Nursing Diagnoses: Definition and classification*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)

Note: All CSNO and NASN publications are excellent resources for school nurses. A complete list of these publications can be found at their respective websites.

Order Information:

- Required textbooks for fall 2010 go on sale through the CSUF Kennel Book Store on July 26, 2010. Books can be ordered online at <http://www.kennelbookstore.com>, however, there is a shipping charge. Students attending Orientation will have the opportunity to purchase books in the morning that same day from the bookstore. Publications from other organizations/sources will need to be ordered online or by mail.
- California School Nurses Organization publications go to www.csno.org
- National Association of School Nurses go to www.nasn.org

ASSIGNMENT EVALUATION

Assignment	Points

Response to Pre-Phase II Knowledgebase Assessment Questionnaire	2.0
Philosophy of School Nursing Paper	6.0
Responses to weekly questions (14 @ 2.0 points each)	28.0
Responses to scenarios following weekly Bb presentations (29 @ 1.0 point each)	29.0
Participation in development and posting of a presentation on Blackboard	10.0
Creation of a scenario and participating in discussion following own presentation.	3.0
School Board Meeting Paper	11.0
Cultural Differences – assigned book with questions or Cultural Interview Paper	11.0
<i>Note: See assignment guidelines for details</i>	<i>Total</i>
	100.0

STUDENT SUPPORT AND BUDDY SYSTEM

I. Area Support Groups:

The purpose of Area Support Groups is to strengthen connections among classmates and with the program. For that reason steps were taken before the beginning of the semester to encourage networking among students through the exchange of student email addresses within support group areas and around the state. On Orientation Day new students are strongly encouraged to attend the ‘Get Acquainted Luncheon’ held on the university campus which gives students additional opportunity to become better acquainted with classmates and faculty.

II. The Buddy System:

Presentation partners or ‘buddies’ have been brought together to provide students with additional support and to give each student another classmate to connect with in the online program. Prior to the beginning of the semester, faculty took the liberty of creating partners, as much as it was possible within support group areas. An important role that partners have is to work together to develop a Blackboard presentation for classmates once during the semester. Note: This is a statewide online program. Partners should expect to work online through Blackboard or through use of email on their presentations. Occasionally, partners may be geographically close enough to work together in person.

III. Blackboard Presentation – How Partners Select a Week and Topic:

- A. Luck of the Draw. On Orientation Day, presentation partners are given the opportunity to draw a slip of paper from a 'hat' which will determine the week in which those partners will present a Blackboard presentation to classmates.

Note: Student presentations do not begin until the third semester week.

- B. Subject Matter Selection for Presentation. After drawing a week in which to do their presentation, partners will then review the nine weekly "questions" for that week (actually a cluster of questions specific to subject matter) found in the Nursing 184 Weekly Questions Booklet, and select two (2) of those questions in order of preference on which they will like to base their presentation.
- C. Finalizing a Presentation Selection. At the conclusion of Orientation Day, partners turn in a slip of paper to faculty indicating (1) the week in which the partners will be presenting, (2) the numbers of the two questions selected, in order of preference, on which partners would like to do their presentation. Students will be notified by the end of the first week of the semester as to which question they will be able to use for their presentation.

Note: In some cases it may be necessary to ask a student to work alone if a partner is not available. Or, a student may prefer to work alone on a presentation, if so, speak with faculty.

ASSIGNMENTS

I. Development of a Personal Reference Manual:

- A. Students are expected to develop a Personal Reference Manual of resource information that will be useful to the student in his/her own school nursing practice. This can be an electronic document kept on a computer hard drive, a CD, or hard copy.
- B. It is suggested that the manual include the following:
1. Responses weekly research questions in N 184
 2. Copies/outlines of Blackboard presentations with information sources
 3. Useful items found in the course document sections
 4. Useful information from N186, i.e. teaching outlines, information shared
 5. Important websites and other resources useful in school nursing practice

II. Responding to one weekly research question (cluster) each week selected for write up by the student:

(See *Nursing 184 Weekly Questions Booklet*)

A. Choosing a weekly question to research and write up on your own:

1. There are a total of 9 questions (clusters of questions) for each semester week;
2. On Orientation Day, 2 of these 9 weekly questions will be selected by partners for Blackboard presentations;
3. The class will be notified of questions presenters have selected by end of week one;
4. Of the remaining 7 questions each week (not selected for a presentation), students are to choose ONE of those questions to research and write up on his/her own.

Note: Students presenting on Blackboard in a particular week are not required to research a question on their own for that week.

B. Guidelines for writing up responses to weekly research questions.

1. Responses should be type written in APA format (double spaced with 1” margins and 12 font), or students may use a ‘complete’ outline form to respond to question. (See *Nursing 184 Weekly Questions Booklet* for correct APA format.)
2. Questions must be restated at the beginning of the response (single spaced, 10 font).
3. Sources must be cited where information was found to answer question.
4. Responses to questions should be succinct, but conveying a good understanding for the subject matter.
5. Suggested length of responses, 2 pages, with sources cited on a separate page.

Note: The sources where information can be found to respond to weekly questions are indicated immediately after each question (or cluster of questions). See *Nursing184 Weekly Questions Booklet*.

III. Guidelines for Developing a Blackboard Presentation: (with a partner or on your own)

A. Purpose, to enhance student learning through reading and participation in discussion.

B. What needs to be taken into consideration in creating a Blackboard presentation:

1. Presentations should stress key points of meaningful information relevant to childhood health issues and school nurse practice.
2. Be sure to include any reference to Education Code sections, district policies, CSNO/NASN Position Statements, theories, current research findings, and other information that may be relevant.
3. Sources where information was found must be cited for the benefit of readers.
4. Suggested length of word document presentations, 4-5 pages, using APA format. Include clip art, charts and other eye catching information for reader interest; OR

5. Partners may choose to do a PowerPoint presentation. The PP should be developed from an complete outline which needs to be attached in another thread for those classmates who may not be able to open the PowerPoint.
6. Creativity to stimulate reader interest is always encouraged, however greater importance should be placed on the quality and value of the information shared.

C. At the end of each presentation the presenters are to create a **case scenario, or a well thought out question** (if more appropriate) that the reader can relate to his/her own school nursing practice. The case scenario, or question must be based on the information shared in the presentation and must do one of the following:

1. Encourage reader to share a relevant experience specific to his/her school nursing practice, i.e., client care, policy, program, ethical dilemma, problem, solution;
2. Encourage the reader to share additional information relevant to the presentation, i.e., other research; relevant theory; legal/political issue; new legislation; funding source, useful website, community resource, other;
3. Encourage the reader to be a creative thinker/problem solver.

D. Presentations **must** be posted on Blackboard no later than Friday prior to the week due to give classmates ample time to read and participate in discussion in timely manner.

E. Presenters are responsible for monitoring reader input following their presentation and must respond to questions posed by readers. Presenter should also follow up on technical problems relevant to posted presentation as soon as possible.

Note: For steps to post presentation see N184 Weekly Questions Booklet and N184 on Bb.

IV. Participating in Discussion Following a Blackboard Presentation:

- A. Respond to case scenario or question posed by presenters with application to your own school nursing, or as directed, using at least a quality paragraph (one opening sentence, at least 3 contributing sentences, and a closing sentence);
- B. Read through postings by other classmates and select one posting to respond to that you can relate to your own school nursing practice, personal beliefs, philosophy or experience.

Note: Participation following presentations should take place during the week in which the presentation is posted in order to make participation meaningful to others.

- B. Rate both student presentations using the Bb “star” system. This is an anonymous!

To summarize student responsibility each week:

* Students are responsible for responding to two (2) Blackboard presentations done by fellow classmates each

week which have been based on two of the nine weekly questions.

* Students are responsible for researching one (1) of the remaining seven weekly questions on his/her own.

Other Written Assignments

V. Personal Philosophy of School Nursing Paper

Due with Module I

- A. Before beginning your paper, review the definition of a “philosophy.” A philosophy is more than a job description! There is no definitive philosophy of school nursing. School nursing is an individual specialty in nursing practice that may change with time.
- B. Define key concepts pertinent to school nursing that you will use (e.g., health, wellness).
- C. Develop a personal philosophy of school nursing based on the following:
 - Standards of Nursing Practice, theoretical concepts, moral/ethical responsibilities;
 - Your own values, beliefs, upbringing, and personal understanding;
 - Your perception of the school nurse role and his/her responsibilities (not duties);
- D. Write a 2 page paper using APA format. Sources of information/references must be cited on a separate page. See *N184 Weekly Questions Booklet* Appendix for APA format.

Reference sources: Text: Selekman, Ch. 1-4; Standards of SN Practice; Selected readings in *Nursing184 Weekly Questions Booklet*, Week 1; BRN website at <http://www.rn.ca.gov/>

VI. School Board Meeting Paper

Due Module II

- A. Review school board function, responsibilities, power over district, the election process, terms of office, and to whom the board is accountable. For insight, go to district website and/or http://www.arsba.org/Assests/PPT/dutiesfinal_McFetridge.ppt
- B. Attend a local district School Board meeting (spend approx. 2 hours at the meeting).
- C. Use the following prompts to direct your observations:
 - Opening session – how conducted, general atmosphere, those in attendance;
 - Key items - the board’s process for discussing issues, rules for public comment, method for keeping order, and final vote or outcome of key issues;
 - Any ongoing battles between the school board, superintendent, outside groups; any recent publicized accounts of disgruntled parents, fiscal concerns, etc., and how these were addressed;
 - Behavior of board at meeting (e.g., questioning, directing, rubber-stamping).

- D. Write a 3 page paper using APA format (*See Nursing 184 Weekly Questions Booklet, Appendix*).
- E. The following should be included in your school board paper write up:
- * Summarize insight gained into school boards, i.e., function, roles and responsibilities, as indicated in “A” above;
 - Observations made during board meeting as indicated in “C” above;
 - Respond to why it is important for the school nurse to have insight into the purpose and workings of the school board;
 - Will you plan to attend a future board meeting? Why? Why not?
 - Include scanned copy of abbreviated school board agenda with front page and date.

VI. Cultural Differences Book & Questions/Cultural Interview Paper - Due Module III

(Select one of the following two assignments)

A. Read Anne Fadiman’s *The Spirit Catches You and You Fall Down*.

- Select and answer eight of the questions from the list found at the back of book and respond to each question using one or two quality paragraphs.
- Has reading the book made a difference in your own sensitivity towards cultural differences and/or understanding for cultural issues?
- What impact will this insight have on your own interaction with culturally different students/families in the future?
- Summarize key aspects of Leininger’s Transcultural Nursing Model (Selekman);
- Total Length, 3-4 pages, APA format (*See Nursing184 Weekly Questions Booklet*).

(OR students may choose to)

B. Conduct a Cultural interview:

1. *Select an interviewee who is a parent of a school aged child/children who comes from a cultural background other than your own (preferably a fairly new immigrant).*
2. *Before the interview, research background information on their particular culture to gain some insight in order to direct your questions. Summarize specifics on what you have learned about the culture/ethnic differences in a page or less.*
3. *Review use of open ended questions (Introduction to Counseling course) and*

prepare a list of relevant questions for the interview.

4. *During the interview* consider including the following:

- Culture views, stereotypes, misconceptions of USA, suspicions, historical issues;
- Issues related to kinship , food, language, religion, customs, values, beliefs;
- Cultural views and stereotypes family may continue to adhere to in USA, such as Health/illness patterns, cultural remedies/healers still used and how often;
- Communication issues, access to care, views on medical care in USA;
- Family breadwinner, work ethic, educational level, use of leisure time.

5. *In writing your paper:*

- Using interview questions as a guide, write a narrative regarding insight gained;
- Summarize key points of Leininger's Transcultural Nursing Model with application to the subjects in your interview (See Selekman text).
- Comment on how cultural sensitivity and awareness on the part of health care providers can improve health outcomes for children and their families?
- How will you apply what you have learned to your own school nursing practice?
- What did you learn about the using open-ended questions and the interview process?
- Is there something that you would change in future interviews?
- Write a 3-4 page paper using APA format (include cultural background review, interview narrative, cultural model, and personal insights gained from process.)
- Scan original interview notes and include along with paper (or fax to 559-278-6360).

VII. Sending Completed Assignment work to Instructor

A. Completed module work is due on the Monday following the last Friday of each module.

Module No.	Begins Monday	Ends Friday	Send Date	Grace Period to	Late Work Deduction
I	8/23/10	9/17/10	9/20/10	9/24/10 11:59 p.m.	9/25/10 10% per wk
II	9/20/10	10/15/10	10/18/10	10/22/10 11:59 p.m.	10/23/10 10% per wk
III	10/18/10	11/12/10	11/15/10	11/19/10 11:59 p.m.	11/20/10 10% per wk
IV	11/15/10	12/10/10	12/13/10	12/17/10 11:59 p.m.	12/18/10 10% per day

B. Sending assignment work:

- Assignment work is to be sent through Blackboard using 'Assignment Drop Off.' (Steps to send work can be found in Blackboard 'Assignment' Section).
- All assignment work for each module must be included in ONE document, which includes both responses to weekly research questions and other assignments.
- Work must be clearly titled. Responses to weekly research questions within the document should be restated as indicated and identified by week and question number.
- Participation in discussion following Blackboard presentations does NOT have to be included in the document as faculty will be monitoring this on the discussion board.
- Students are advised to maintain copies of all their work on their own computer or on a CD.
- After reading through assignment work submitted, faculty will post points earned and reply with comments using the window and attachment capability located in the student's online grade book (allow 14 days).

- If a student has unavoidable circumstances that prevents the student from sending work on time, the instructor **MUST** be notified well before the assignment due date.

Regarding quality of written work:

Careful proof reading is essential for all paperwork!

A paper with more than **six** spelling and/or grammatical errors might receive a lower grade, or in extreme cases, a request to rewrite the paper. Among the evaluative criteria employed by instructor are clarity, organization, support for ideas expressed, and grammar. The length of the paper is not as important as criteria indicated.

GRADING CRITERIA

1. Responses to Weekly Questions (Total 28 Pts.) Researching 14 questions at 2.0 points each

Demonstrates understanding of subject matter, depth and quality of responses	21
Questions are restated, references cited, APA format or complete outline form	7

2. Participation in Weekly Discussion following Blackboard Presentations (Total 29 Pts.) Discussion participation following 29 Bb presentations at 1.0 point each

Following each Bb presentation, at least one quality paragraph in response to the case scenario posted by presenters (2/3 pt.); in addition, one brief contribution to discussion in response to posting by one other classmate (1/3 pt).	29

3. Creating and Presenting a Blackboard Presentation (Total 13 Pts.) Individual credit for creating and monitoring a Bb Presentation

Thoroughness and quality of information shared (for PowerPoint includes outline)	7
Creativity/format/flow/readability of information presented	2
Promptness in placing presentation on Blackboard	1
Scenario/Question for reader (1) monitoring the discussion of your Bb presentation (2)	3

4. Personal Philosophy of School Nursing (Total 6 Pts.)

Expression of personal beliefs/Insight into the role of the school nurse	5
Writing skill/APA format	1

5. Attendance at School Board Meeting and Write-Up

(Total 11 Pts.)

Thoroughness/Completeness	6
Insight/Evaluation	4
Writing skill/APA format	1

Choice, Culturally Different Book and Questions, **OR** Cultural Differences Interview and Paper:

6. Cultural Differences Book and Questions

(Total 11 Pts.)

Quality of insight shared in responses to book questions	8
Application of cultural theory/personal analysis/insight gained	1
Application to School Nursing Practice	1
Writing skill/APA format	1

7. Cultural Differences Interview and Paper

(Total 11 Pts.)

Quality of preparation based on research into cultural background of interviewee	3
Depth of Insight as a result of interview/open ended questions (narrative & notes)	6
Application of cultural theory/personal analysis/insight gained	1
Writing skill/APA format/inclusion of interview notes	1

8. Completion of Pre-Program Knowledge Based Questionnaire

(Total 2 Pts.)

Completion of Pre-Program Assessment questionnaire	2

UNIVERSITY POLICY STATEMENTS

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Important note: This syllabus is subject to change due to unforeseen circumstances. Written substitution will be provided should this occur.

NURS184

Weekly Questions

Booklet

Including
Reference Sources

Fall Semester 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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BMM-07/10

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(Note: Syllabus page numbers do not correspond with this Program Assessment Document)

N184/N186 COURSE CALENDAR OF EVENTS AND ASSIGNMENTS FOR FALL 2010

Sat. 8/14/10	Orientation Day on CSUF campus, McLane Hall 7:45 A.M. to 3:30 P.M.		
Mon. 8/23/10	First day of class		
NURSING 184		NURSING 186	
<i>Due Date</i>	<i>Assignments</i>	<i>Due Date</i>	<i>Assignments</i>
Note: Completed assignments are to be sent electronically using 'Assignment Drop Off' in Blackboard unless otherwise indicated. Student work will be reviewed by instructor and comments and grades will be posted in the student's online grade book. All work sent must include a cover page with the student's name, module period, and instructor's name. Module assignments are due the Monday following the last Friday of each module period. Work will be considered late after a four day grace period ending the following Friday at 11:59 p.m. 10% per week will be deducted after the grace period for Module I, II, III. 10% per DAY will be deducted after the grace period following Module IV. (See syllabi for details regarding sending work.)			
Saturday 8/14/10 Orientation Day	* Completed Pre-Assessment Questionnaire * Selection of week in which student partners, or individual students, will give presentation. * Choosing subject matter for Bb presentation.	Tuesday 9/7/10 	Fax to 559-278-6360: * Signed approval for SN to act as preceptor * Preceptor Vitae if not on file * Signed Preceptor/Student Contract * Exp. SN Project signed form (if appropriate) Student Intern Agreement must be in place!
Monday 9/20/10 Module I Wks 1-4	Module One: * Responses to 1 research question for each of the following weeks 1, 2, 3, and 4. * Responses to scenarios following 2 Bb presentations per week for weeks 1, 2, 3, 4. * <i>Philosophy of School Nursing paper</i>	Monday 9/20/10 Module I Wks 1-4	* Student Goals and Learning Objectives * Initial clinical journal entries, meetings with preceptor, impressions, plans, beginning clinical * Responses to 2 journal questions * Personal contributions to discussion on Bb per guidelines in syllabus for weeks 1, 2, 3, and 4.
Monday 10/18/10 Module II Wks 5-8	Module Two: * Responses to 1 research question for each of the following weeks, 5, 6, 7, and 8. * Responses to scenarios following 2 Bb presentations per week for weeks 5, 6, 7, 8 * <i>School Board Meeting Paper</i>	Monday 10/18/10 Module II Wks 5-8	* 2 nd clinical journal entries * Exp SN project progress report (if applicable) * Responses to 2 journal questions * Personal contributions to discussion on Bb per guidelines in syllabus for weeks 5, 6, 7, and 8.
Networking	<i>Students are encouraged to attend and network at the fall CSNO Section general meeting/conferences in their area and consider planning an area networking luncheon if possible at least once during the semester.</i>		

		Mid-Term 10/4/10 to 11/12/10	* Write brief mid-term self evaluation (Mod III) * Review/Revise Goals/Objectives w/ preceptor * Arrange/accomplish Three-Way Conference
		Monday 11/15/10	<i>Share Health Teaching Plan Outline or highlights of Policy/Procedure Paper on Bb</i> (Send complete assignment via Bb 'Assignment Drop' with other Module III work when due.)
Monday 11/15/10 Module III Wks 9-12	Module Three: *.Responses to 1 research question for each of the following weeks 9, 10, 11, and 12. * Responses to scenarios following 2 Bb presentations per week for weeks 9, 10, 11, 12 * <i>Cultural Differences book report/Paper</i>	Monday 11/15/10 Module III Wks 9-12	* 3 rd clinical journal entries * Responses to 2 journal questions * Personal contributions to discussion on Blackboard per guidelines in N186 Syllabus for weeks 9, 10, 11, and 12. * <i>Send completed Selected Assignment</i>
11/23-11/27	Thanksgiving Week		
		Monday 11/29/10	<i>Cross Cultural/Special Ed. Case Study</i> Electronic copy sent via Bb 'Assignment Drop'
Monday 12/13/10 Module IV Wks 13-15	Module Four: * Responses to 1 research question for each of the following weeks, 13, 14, and 15 * Responses to scenarios following 2 Bb presentations per week for weeks 13, 14, 15 * Complete survey " <i>Teaching Effectiveness</i> " for N184 and N186 online as directed. * Student Course Evaluations for N184 and N186, return through Bb 'Assignment Drop'	Monday 12/13/10 Module IV Wks 13-15	* 4 th clinical journal entries * Responses to 2 journal questions * Final Self Evaluation <u>The following must be faxed or mailed:</u> *Preceptor Evaluation of Prof. Dispositions *Preceptor Evaluation of Clinical Competencies *Preceptor Checklist of Skills * Preceptor Evaluation of Clinical Course *Student Evaluation of Preceptor Experience

SCHEDULED COURSE CONTENT, FALL 2010

Module One, August 23– September 17, 2010

Philosophy of School Nursing * History and Current Events * Nurse Practice Act *
Scope and Standards of School Nurse Practice * Legal Guidelines * Nursing Theories *
District Organization * Coordinated School Health Programs * School Nurse Calendar
*District Health Services * Management Process * Dimensions and Interventions

Week 1, 8/23/0-8/27/10:

Philosophy of school nursing; history, current issues, and future trends; the Nursing Practice Act; transitioning into school nursing; theoretical basis for practice, professional organizations; school community and district organizational structure; standards of practice; licensure and certification.

Week 2, 8/30/10-9/3/10:

Coordinated school health programs and role of the school nurse; the nursing process in the education setting, evidenced based practice, rights to health services and the legal system, Neuman Systems Model, other nursing models/theories; school nursing on student performance.

Week 3, 9/6/10-9/10/10:

Federal and state statutory laws that relate to school nursing practice; HIPAA/FERPA, elements of a lawsuit; position statements; sound documentation; Standards of Professional Performance; role of health clerks in the school setting; state law/codes; school district policy.

Week 4, 9/13/10-9/17/10:

School health models; School Nurse Conceptual Framework, Standard 16, program management; concept of administration, management & leadership; conflict management skills; employee job satisfaction; primary, secondary, & tertiary intervention in school nursing practice.

Module Two, September 20 - October 15, 2010

Adaptation in School Population * Safe and Healthy School Environment *
Medications * School Readiness * Mandated Screening Programs * Migrant Health
Issues * Injuries * Acute and Chronic Health Problems * Communicable Disease

Week 5, 9/20/10-9/24/10:

Disease prevention through immunization; Child Health & Disability Prevention program; Preschool readiness; Standards of Professional Performance, Standard 14; school site safety; keeping children with food allergies safe; medication administration in schools; training UAPs.

Week 6, 9/27/10-10/1/10:

Outcome identification in school nursing practice; role of the school nurse in screening programs based on CCR and Ed. Code; assessment of growth and development and BMI; identifying barrier to a healthy life style for children; physical assessment skills for the school nurse.

Week 7, 10/4/10-10/8/10:

Community collaboration; School Health Index; helping students and families cope with stress; issues related to bullying, cultural competence; children of migrants/refugee families; school nutrition services; dental hygiene programs; physical assessment skills for the school nurse.

Week 8, 10/11/09-10/15/10:

The role of the school nurse in managing health care issues and related emergencies; First Aid; chronic health conditions such as asthma, diabetes I, Sickle Cell Disease; Pediculosis control in the school setting; communicable disease prevention; and tuberculosis screening programs.

Module Three, October 19 - November 13, 2010

The Nursing Process * NANDA Nursing Diagnosis * Individual Health Care Plans * Health Promotion * Health Education Programs * Cultural Differences * Poverty and Dysfunctional Families * Learning Disabilities * Child Abuse * IDEA * 504 Plans *

Week 9, 10/18/10-10/22/10:

The Nursing Process; NANDA Nursing Diagnosis and standardized language; Individual Health Care Plans, Emergency Action Plans; caring for children with ADHD, cycle of childhood obesity; seizures, Cystic Fibrosis, Diabetes I, Allergic Rhinitis, Encopresis, Sickle Cell Disease.

Week 10, 10/25/10 -10/29/09:

Health education, a component of coordinated school health system; conceptual model for health teaching and learner readiness; National standards and CA health framework; developing health education programs; family and community involvement; health promotion for faculty and staff.

Week 11, 11/1/10-11/5/10:

Anxiety disorders and behavior issues: Tourette syndrome, children with autism, school phobia and absenteeism; poverty and homelessness; children of dysfunctional families; cultural competence; transcultural differences; gifted children; child abuse reporting.

Week 12, 11/8/10-11/12/10:

Office of Civil Rights; IDEA and other laws that protecting rights of individuals with disabilities; Student Study Team; 504 Plans; health conditions that impact learning, ADHD, vision and hearing problems, severe allergies, acting out and other behavior.

Module Four, November 15 – December 10, 2010

Special Education * IEP Process * Interdisciplinary Collaboration * Legal and Ethical Issues * Confidentiality * Special Ed. Screening and Assessment * Early Intervention * Specialized Physical Health Care * Supervision of Care

Week 13, 11/15/10-11/19/10:

Special education, IEP (Individual Education Program) process; the IEP team and interdisciplinary collaboration; Individual Health and Support Plans; SELPA (Special Education Local Planning Area); mainstreaming; families and the grieving process.

Week 14, 11/29/10-12/03/10:

Standard 12, Ethics; ethical theories; ethical decision making and problem solving; foster children in the system; early childhood assessment and intervention; IFSP (Individual Family Service Plans); SDC teachers and school staff perceptions of the school nurse role.

Week 15, 12/6/10-12/10/10:

Standard 11, Collaboration; chronically ill and medically fragile children; special physical health care needs; supervision and training of UAPs; DNAR (Do not attempt to resuscitate); infectious disease control in medically fragile population; program placement.

N184 MODULE QUESTIONS

Note: Selected readings for this course can be found in the *CSUF Madden Library* accessed online. To assist students in finding answers to questions quickly, sources are listed following each cluster of questions (Journal articles by first author only). It may not be necessary to read through all of the resource material provided to answer a question. When you are satisfied that you gained enough knowledge to answer the question feel free to stop.

Week 1, 8/23/10-8/27/10:

Philosophy of school nursing; history, current issues, and future trends; the Nursing Practice Act; transitioning into school nursing; theoretical basis for practice, professional organizations; school community and district organizational structure; standards of practice; licensure and certification.

Note: For Module One, along with one research question a week, students will also complete a *Personal Philosophy of School Nursing*. See Assignments in N184 Syllabus (p.14).

Note: For Week 1, students are to select one (1) of the following (clusters of) questions to research and write up on your own. Do not select question “1” or question “2” as these questions have already been selected for Blackboard presentations by instructors. See syllabus for discussion guidelines following Blackboard presentations.

Questions:

1. Share your findings with regard to educational requirements for school nurses around the country and compare your findings with requirements for school nurses in California. Who is the credentialing body? Include in your discussion the historical basis for credentialing in CA and value of a 5th year of university coursework. Are there advantages of having a masters in school nursing? Are there advantages in national certification for the CA school nurse?
(Text: Selekmán, pp. 295, Ch. 5. Selected Readings: Denehy, J. Miller, B, 2008)
2. Discuss standards of practice, what they are and what they are not. Comment on the different kinds of standards. What is the best definition of a nursing standard of practice? Apply this definition to school nursing standards. What key concepts can be extrapolated from this definition? List these concepts and include one brief example of each as it relates to school nursing.
(Text: Selekmán, Ch. 4.)
3. Discuss the historical basis for school nursing practice and describe the role of the school nurse today according to the California Education Code. Has the purpose behind school nursing changed that much since its early beginning in the United States in 1902? What changes might we expect to see in school nursing practice in the next decade? (Text: Selekmán, Ch. 1. Selected Readings in N184 Documents section: Role of the school nurse, CA Ed Code section 49426 and Stanislaus COE, Ch 1.)

4. Discuss application of the *Nurse Practice Act* in school nursing. What are common threads of responsibility that are the basis for all nursing practice regardless of the area of practice? See CA Business and Professional Code, Nurse Practice Act – Article 2. Scope of Regulations 2725-2725.1.
(Text: Selekman, Chapters 4 & 6. Publication: NASN booklet, pp. 50-55. Websites: www.leginfo.ca.gov or see N184 Documents section for CA codes.)
5. Discuss the importance of a theoretical basis for school nursing practice and the importance of a tested knowledge base. Describe the conceptual framework developed by Wold and Dagg (1981) to guide the clinical practice of school nursing and the five overlapping strands involved. Comment on two nursing models/theories that you could be applied in your school nursing practice and why.
(Text: Selekman, Ch. 2.)
6. Describe the dynamics of the school community and district organization. What are the influences, constraints, and boundaries facing the school nurse in his/her practice? Include a breakdown (organizational chart) of the chain of authority in your district and describe where health services fits into the picture.
(Text: Selekman, pp. 119-120, 1035-1039. Selected Readings: DeSisto, M.C; Miller, B. 2009; Stanislaus COE, Ch 1.)
7. Transitioning into school nursing from another area of nursing? Compare your current role as a school nurse with your previous role and nursing experience. Discuss differences in the area of role responsibility, nurse-client relationship, and job satisfaction and stressors. Did your previous perception of the school nurse role compare with reality?
(Text: Selekman, Chapter 6; NASN booklet, pp. 50-55. Selected Readings: Junious, D.L.; Foley, M.)
8. You are a PNP/FNP coming into school nursing. What do you see as your role in the school setting? Discuss ways you can blend your PNP/FNP skills and that of the school nurse to better serve children and families. Visit a school-based clinic in your area if possible for added insight into a more clinical role for the PNP/FNP in the school setting.
(Text: Selekman, Ch. 6, & pp. 421-422. Text: Publication: NASN booklet, pp. 50-55; Selected readings: Stanislaus COE.)
9. Find out about professional organizations that have a relationship to school nursing. Write a paragraph regarding the significance of each of the following: Assoc. of CA School Administrators; CA Department of Education; CA School Nurses Organization; National Association of School Nurses; National Education Assoc.; CA Teachers Assoc.; CA Parent Teacher Assoc.; National Alliance of Pupil Services Organization; and School Nurse International.
(Text: Selekman, Ch. 6, & pp. 421-422; Publication: NASN booklet, pp. 50-55; Websites below.)

Week I, Assignment Reference Sources:

Textbooks/Publications:

- Cassinerio, P., Lowe, S; Glinskas, M. (2006). Health Services Manual. *Stanislaus COE*: Modesto, CA (See N184 Documents section.)
- Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.
- NASN. (2006). *School nursing: Scope & standards of practice*. Silver Springs, MD: NASN.

Websites:

- Association of California School Administrators, www.acsa.org
- California Association of Private School Organizations, www.capso.org/
- California Department of Education, www.cde.ca.gov/
- California Department of Education, www.cde.org - ("School Fiscal Services Handbook")
- California School Nurses Organization, www.csno.org
- California Teachers Association, www.cta.org
- National Alliance of Pupil Services Organization, www.napso.org
- National Association of School Nurses, www.nasn.org (also for info on SN International)
- National Education Association, www.nea.org
- Parent Teacher Association, www.capta.org
- School Services of CA, Education Resource Information, www.sscal.com/links.htm
- School Nurse International, www.nasn.org/Default.aspx?tabid=382

Selected Readings: (See CSUF Madden online journal access or Electronic Reserve)

- Denehy, Janice. (2007). Who is sitting in the health office? *Journal of School Nursing*, 23(1), 1.
- DeSisto, M.C., & Desisto, T. P. (2004). School nurses' perception of empowerment and autonomy. *Journal of School Nursing*, 20(4), 228-233.
- Foley, M., et al. (2004). A multi-factor analysis of job satisfaction among school nurses. *Journal of School Nursing*, 20(2), 94-100.

- Junious, D. L. et al. (2004). A study of school nurse job satisfaction. *Journal of School Nursing*, 20(2), 88-93.
- Miller, B. (2009). *District organizational chain of authority*. Lecture notes, CSUF, 1-3 (See N184 Documents section)
- Miller, B (2008). *Credentialing in California*. PowerPoint, see N184 Documents section.
- Stanislaus County Office of Education. (2006). Ch 01, Introduction to school nursing. *Stanislaus County Office of Education Health Services Manual*: Author. (See N184 Documents section)

Week 2, 8/30/10-9/3/10:

Coordinated school health programs and role of the school nurse; the nursing process in the education setting, evidenced based practice, rights to health services and the legal system, Neuman Systems Model, other nursing models/theories; impact of school nursing on student performance.

Note: For Week 2, students are to select one (1) of the following (clusters of) questions to research and write up on their own. Do not select question “1” or question “2” as they have been selected for Blackboard presentations for Week 2. See syllabus for discussion guidelines following Blackboard presentations.

Questions:

1. List and briefly discuss the eight components of a coordinated school health program. When is a school health program comprehensive and coordinated? What are the key elements of a change process that schools and districts can use to improve education for school aged children.
(Text: Marx, Wooley, & Northrop, Ch. 1; Selekmán, Ch. 3. Website: CDE.)
2. After 1973, the ANA (American Nurses Association) recognized that not only was a set of national standards needed for nursing, but “specialty” standards were also needed. School nursing practice is a specialty practice based on *School Nursing: Scope and Standards of Practice* (NASN & ANA, 2005). List the “Standards of Professional Performance” (7-16) and, using a measurement criteria, briefly describe how you can relate each standard to your school nursing practice.
(Text: Selekmán, Ch. 4; Publication: NASN.)
3. Discuss steps involved in the development of a coordinated school health program. Give examples of how the school nurse can begin to communicate, collaborate, plan with other school personnel or departments to identify a need and to take steps to develop a program. Who might the players be? Include in your discussion other things to take into consideration, i.e., state and district policies, family and community.
(Text: Selekmán, Ch. 3; Marx, Wooley, & Northrop, Ch. 2. Website: CDE.)
4. Discuss role of the state in coordinated school health programs. What is included in California’s infrastructure related to coordinated school health? Include in your discussion CA’s blueprint for coordinated school health programs - purpose, supports, and assumptions. List the 5 goals and elaborate briefly on each. Compare California’s infrastructure with the examples found in MWN text (p. 257) and comment on findings.
(Text: Marx, Wooley, & Northrop, Ch. 11. Website: CDE.)
5. *Standards of Practice*, components of the nursing process. List the six standards of practice. Step by step, using each standard (including sub-categories in 5), describe how you apply them in your school nursing practice giving an example for each. This can relate to a client (fictitious/actual school aged child in your practice) or a problem you might encounter in your school nursing practice.

(Text: NASN, Selekman, Ch. 4)

6. Evidence based practice. Discuss the impact of school nursing has on school performance and child well being. What are the two most important implications for further research findings noted in the Delphi study (2002) to validate school nurse interventions in the educational setting? What are the implications for further research in these areas?

(Text: Selekman, pp. 247-253. Selected Readings: Bagby, K.; Maughan, E.; Weismuller, P.C.)

7. Discuss what children and families should expect as their rights with regard to health services in the legal system. Include in your discussion the 1997 Balanced Budget Act (Public Law 105-33) and federal funds allotted to helping low income families. What are the issues related to access to care? What are some important points to make regarding policy guidelines for school districts that become involved with providing services? What role can the school nurse play in each of these areas?

(Selekman, pp. 283-292.)

8. Explain the elements of Betty Neuman's Systems Model which is the nursing model of choice in the CSUF Department of Nursing. Connect these elements to primary, secondary and tertiary prevention as they relate to a hypothetical client or actual client in your school nursing practice. Explain how you could use the model to strengthen lines of defense in helping your client/family combating the issue/problem.

(Selected Readings: Lancaster, D.; N184 Document section. Website: Nursing theories.)

9. Describe three nursing theories/models, other than the Neuman's Systems Model, that you could realistically use in your school nursing practice, i.e., Dorothea Orem's Theory; Roy Adaptation Model, etc. Demonstrate your understanding by including a brief scenario using each. What value do you place on using theories/models in your school nursing practice? Explain.

(Text: Selekman, Ch. 2 Website: Nursing theories.)

Week 2, Assignment Reference Sources:

Textbooks/Publications:

California Department of Education. (2003). *Health framework for California public schools: Kindergarten through Grade Twelve*. Sacramento, CA: Author.

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

NASN. (2006). *School nursing: Scope and standards of practice*. Silver Springs, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Department of Education, www.cde.ca.gov (Type in “Coordinated School Health”)

Coordinated School Health, www.cde.ca.gov/ and type in “coordinated school health”

Healthy Kids Resource Center, <http://www.californiahealthykids.org>

CSNO, www.csno.org

NASN, www.nasn.org

Nursing theories, <http://www.sandiego.edu/academics/nursing/theory/>

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Bagby, K. (2007). Evidence-based practice guideline: Increasing physical activity in schools – kindergarten through 8th grade. *Journal of School Nursing*, 23(3), 137-143.

Lancaster, D. (1996). Neuman’s systems model. *Conceptual Models of Nursing*, 199-223.

Weismuller, P.C., et al.(2007). Elementary school nurse interventions: Attendance and health outcomes. *Journal of School Nursing*, 23(2), 111-118.

Week 3, 9/6/10-9/10/10:

Statutory laws that relate to school nursing practice; HIPAA/FERPA, elements of a lawsuit; value of position statements; sound documentation; role of the school nurse as a leader; role of the health clerks in schools; state law/codes; school district policy.

Note: Student Small Group presentations begin Week 3 (See guidelines, N184 Syllabus, p. 13).

Note: Week 3, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. What are statutory laws and why are they established? Give several examples of federal laws that are of particular importance to school nursing and choose one to briefly explain. How do state laws differ from federal laws? Give several examples of state laws that relate to schools and/or school nursing. When does the preemption doctrine apply? Can you give an example of conflicting laws/statutes in California that impacts school nursing practice? What steps should the school nurse take to resolve the apparent conflict? (Text: Selekman, pp. 257-261. Website: CDE)
2. Compare the key provisions of HIPAA (Health Insurance Portability and Accountability Act) and FERPA (Family Education Rights and Privacy Act), the two federal statutory laws that relate to sharing of confidential information in the school setting. Discuss issues related to interpretation and clarification. What impact do these laws have on school nursing practice? What steps should the school nurse take to stay within these laws? (Text: Selekman, pp. 296-298. Selected Readings: Bergren, M.D. 2004 x2; Stanislaus. COE, Ch 3.)
3. Elements of a lawsuit. Discuss the issues related to school nursing and the “law.” Include types of liability, key liability issues, and difference between a civil and criminal lawsuit. Elaborate on strategies that a school nurse can use to safeguard him/herself against the threat of lawsuit. What is the legal basis for “standard of care”? Include the role of the BRN and its power and the disciplinary process. (Text: Selekman, Ch. 12 & pp. 74-93. Selected Readings: BRN; Maxwell, L.)
4. Define “position statement” and comment on its power/legal status. Then go to the CSNO and NASN websites and glean through the position statements found at each of these sites. Select four position statements that address the same subject matter at each of these websites and review them. Briefly summarize the subject matter and position held by each organization, and elaborate on any striking differences you find. Comment on ways positions statements can strengthen your school nursing practice. (Websites: CSNO and NASN below.)
5. Discuss the importance of sound documentation and issues related to confidentiality and legal access by whom. What are the elements of effective charting? Where should the

school nurse keep confidential health information and why? Can the school nurse share confidential health information and with whom? Read through sections of the CA Ed. Code 4969-49072 and comment on your findings.

(Text: Selekman, pp. 101-102, 178, 245-246, 278-279, 296-298, 1060-1061. Selected Reading: Bergren x 2. Website: OCLI.)

6. Discuss the role of the school nurse as a leader. What is leadership? What should a school nurse leader be able to do? List the seven school nurse roles that require leadership capability. List the seven categories of leadership traits and give at least one example of each. Do you see yourself as a leader in your own school nursing practice? Select one of the categories and give an example of how you fulfill the leadership role in that area. (Text: Selekman, Ch. 6. Selected Readings: Denehy, J.)
7. Outline the duties of the health clerk in the health office. Discuss educational background; depth of training, limitations, evaluation, importance as a member of the health team, your concerns. (Note: Medically fragile children and specialized physical health care procedures will be addressed later). (Text: Selekman, pp. 1052, 1107-1109. Publication: CSNO.)
8. It is important that school nurses know where to find state codes on which school nurse practice is based in California. For insight, go to the Official CA legislative website and locate the following codes: CEC 44877 (CA Education Code); H & SC 124100 (Health and Safety Code); B & PC 2395 (Business and Professional Code); PC 11164 (Penal Code); W & IC 18975 (Welfare & Institutions Code). Briefly discuss the purpose and importance of subject matter found in each of these areas.
9. School nurses must also abide by district policy as well as state and federal laws. Review an existing policy manual and briefly describe two district policies that relate to school health services. On what are district policies based? Speak with an administrator to find out what steps a school nurse or school nurse administrator would need to take to make changes in an existing policy, i.e., a nuts-free policy? Share your findings. (Websites: CDE; OCLI; school district website.)

Week 3, Assignment Reference Sources:

Textbooks/Publications:

Cassinerio, P., Lowe, S; Glinskas, M. (2006). Health Services Manual. *Stanislaus COE*: Modesto, CA (See N184 Documents section.)

CSNO. (2003). *Role of the School Nurse and Health Clerk*. Sacramento, CA: Author.

NASN. (2006). *School nurse: Scope and standards of practice*. Silver Springs, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

California Department of Education (CDE), www.cde.ca.gov, click on

“Legal & Legislative,” then “California Law,” select the type of code number or subject.

California Department of Education (CDE), www.cde.ca.gov, type in “district policies.”

CSNO Position Statements, www.CSNO.org

NASN Position Statements, www.NASN.org

OCLI (Official CA Legislative Information, www.leginfo.ca.gov

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Bergren, M. D. (2004). HIPAA-FERPA revisited. *Journal of School Nursing*, 20(2), 107-112.

Bergren, M. D. (2004). Why give a hoot about HIPAA? The HIPAA/FERPA *interface* (Lecture notes: NASN 36th Annual Conference). Seattle WA: NASN Syllabus, 165-75.

Board of Registered Nursing. (1973-1974). Discipline. *Nurse Practice Act*. Sacramento, CA: Author.

Denehy, J. (June , 2008). Leadership characteristics. *Journal of School Nursing*. 24(3), 107-109.

Maxwell, L. (April 17, 1999). Verdict: School officials unable to assemble inhaler. *Fresno Bee*, A8.

Stanislaus County Office of Education. (2006). Ch 3, School health program: Confidentiality of health information in the school setting/documentation of nursing practice. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents section in Blackboard.)

Week 4, 9/13/10-9/17/10:

School health models; School Nurse Conceptual Framework, Standards of Professional Performance Standard 16, program management; concept of administration, management & leadership; conflict management skills; employee job satisfaction; health promotion and prevention - primary, secondary, & tertiary prevention in school nursing practice.

Note: Week 4, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. What are the four basic assumptions that have underlined the development of school health models? Make a general statement about the function of health services and discuss the various conceptual models and programs that have evolved over time. Comment on funding sources for developing and maintaining health services programs. (Text: Marx, Wooley, & Northrop, Ch. 8; Selekmán, Ch. 2, 1035-1040, 1050-1051.)
2. Comment on the significance and value of each of the three nursing models in Selekmán that may be useful in guiding school nurse practice – A Community Nursing Practice model, Leininger's Theory of Cultural Care, and the Public Health Nursing model. Then discuss Wold's "School Nursing Conceptual Framework model" (1981) and the five overlapping strands and implications for practice. How is the school nurse role depicted? (Selekmán, Ch. 2.)
3. Standard 16: Program Management. Discuss the essence of Standard 16 and its measurement criteria. Using each of the measurement criteria, explain and give examples of how you fulfill the role as a manager of health services. Comment on particular areas of strength and areas that you would like to work on to improve. Prior to responding to this question, did you see yourself as a manager of health services? Or, do you now see yourself more clearly as a manager? (Text: NASN; Selekmán, pp. 87-88, 1050-1051. Selected Readings: Grabeel, J.)
4. Briefly discuss the concept of administration, management, and leadership as they relate to one another. Read through the four basic management functions. Select several key points from each to discuss with application to your own practice. What are the ideal attributes of a supervisory style? Comment on your own management role and style. (Selected Readings: Miller, B.; Wold Ch. 18. Website: Management Styles.)
5. There will be situations that emerge in school nursing practice that require conflict management skills. Discuss issues related to constructive and destructive conflict management. What are some steps that lead to resolution? Comment on personal attributes that contribute to successful conflict management. (Text: Selekmán, pp. 1102-1104. Selected Reading, Miller, B.; Wold, Ch. 18)

6. Discuss the importance of employee satisfaction and a job well done. What are important factors that lead to employee contentment and commitment? Discuss employee concerns, motivation and support. List several ways that the supervisor or employer can model behavior that they would like to see reflected in subordinates and others.
(Text: Selekman, pp. 1088-1093. Selected Readings: Denehy, J.; Foley, M; Junious, D. L.; Miller, B.)
7. Define primary prevention in the school setting. Discuss the role of the school nurse in primary prevention as it relates to coordinated school health. Select and discuss three different programs that address this category and give a brief explanation of each that includes the role of the school nurse.
(Text: Selekman, p. 39, Ch. 3, 20, 21. Selected Reading: Lancaster, D. (wk 2), or N184 Bb Document, Neuman.)
8. Define secondary prevention. What is the difference between primary and secondary prevention? Describe three programs that fall into the secondary prevention category and the role of the school nurse in the light of Neuman's Systems Model.
(Text: Selekman, p.39 Ch. 20 & 21. Selected Reading: Lancaster, D. Wk 2, or see N184 Documents section, Neuman.)
9. Define tertiary prevention as it relates to the role of the school nurse and Neuman's Systems Model. In the light of tertiary prevention, discuss the role of the school nurse in caring for Billy, a 5th grade active boy with hemophilia in the regular school setting. Describe management concerns and health teaching issues. What are steps the school nurse will consider to help Billy and help him strengthen his own lines of resistance?
(Text: Selekman, p. 39, 438, Ch. 29. Selected Reading: Lancaster, D. (wk 2), or N184 Bb Document, Neuman)

Week 4, Assignment Reference Sources:

Textbooks/Publications:

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

NASN. (2006). *School nursing: Scope & standards of practice*. Silver Springs, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

California Department of Education, www.cde.ca.gov

CSNO (Position Statements), www.csno.org

Laws related to school health, www.hkresources.org

Legal guidelines, www.leginfo.ca.gov/calaw.html

Management styles, <http://www.itstime.com/oct96.htm>

NASN (Position Statements), www.nasn.org

Nursing theories, <http://www.sandiego.edu/academics/nursing/theory/>

Selected Readings(See CSUF Madden online journal access or Electronic Reserve):

Denehy, J. (2004). Promoting job satisfaction – a challenge for school nurses. *Journal of School Nursing*, 20(2), 63-64.

Foley, M., et al. (2004). A multi-factor analysis of job satisfaction among school nurses. *Journal of School Nursing*, 20(2), 94-100.

Junious, D. L. et al. (2004). A study of school nurse job satisfaction. *Journal of School Nursing*, 20(2), 88-93.

Miller, B. (2009). *The management process* (lecture notes, Wold Ch.18, CSU: Author, 1-7. See N184 Documents section.

Lancaster, D. (1996). Neuman's systems model. *Conceptual Models of Nursing*, 199-223. (See Wk 2.)

Wold, S. J. (1981). Ch. 18. *School Nursing: A framework for practice*. North Branch, MN: Sunrise River Press.

Module Two, September 20 - October 1, 2010

Adaptation in School Population * Safe & Healthy School Environment *
Medications * School Readiness * Mandated Screening Programs * Migrant Health
Issues * Injuries * Acute and Chronic Health Problems * Communicable Disease

Note: For Module Two, along with questions, students will also complete a School Board Meeting Paper. See Assignments guidelines in N184 Syllabus, p. 14.

Week 5, 9/20/09-9/24/10:

Disease prevention through immunization; Child Health & Disability Prevention program; Preschool readiness; Standards of Professional Performance, Standard 14; playground safety; keeping children with food allergies safe; medication administration in schools; training unlicensed assistive personnel.

Note: Week 5, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Discuss disease prevention relevant to immunization administration – modalities of immune protection, active vaccines, additives and scheduling. Discuss shots given at the same time, and the five “rights” that are important for the school nurse to consider in evaluating immunizations information to determine if the student has met school entry mandates. How will the school nurse counsel with a parent who is fearful about immunizations? (Text: Selekman, Ch. 21. Selected Readings: Greene, A.; Stanislaus COE, Ch. 11.)
2. List CA kindergarten entry immunization requirements. Respond to this scenario: Jeremy, age five years, is being enrolled into kindergarten. He has had 2 DPTs, and 2 Polios prior to age one year. What immunizations does he need? Include timelines for future immunizations. How can the school nurse respond to his mother’s fear of side effects of immunizations? What is your district policy on exclusion? What responsibility does the school nurse have for the annual report? Read through following code sections and comment on key contents: CEC 48216 and H&SC 120330, 120335, 120380. (Text: Selekman, Ch. 21 & pp. 285-292. Publications: CDHS handbook. Selected Readings: Greene, A.; Stanislaus COE. Website: OCLI or see N184 Documents section, CA Codes.)
3. Discuss the Child Health and Disability Prevention (CHDP) Program and the CHDP Gateway Program. Who is eligible for services? At what grade level is a physical exam

required? Can a child be excluded from school for lack of a physical exam? If so, based on what? Discuss reasons and issues related to “waivers.” How often can an eligible child receive a physical exam? Read through the following sections of the Health & Safety Code sections 124025...124115. Comment on contents of H&SC 124085 to 12410. (Selected Readings: CDHS 3 & 6; Stanislaus COE, Ch. 5. Websites: OCLI or see CA Codes in N184 Documents section.)

4. Maria, age 4 years, has been brought by her mother for enrollment into a preschool program in your school district. Discuss the role of the school nurse with regard to screening Maria for school readiness, i.e., expected developmental levels at age 4 years, physical, fine/gross motor, language, self-help, and play; health issues and immunization requirements. Discuss tactics, games, tools the school nurse might use to screen vision and hearing. Briefly comment on sections of Ed. Code that apply.
(Text: Selekman, Ch. 16 & 21; pp. 442-445 & 522-532. Publication: CDHS manual. Selected Readings: Stanislaus COE, Ch 11. Website: OCLI, or see N184 Documents section for CA Codes.)
5. “Standards of Professional Performance,” Standard 14. Explain how you interpret this standard in light of your own school nursing practice. Read through the first four measurement criteria for “the school nurse” and for each of these measurement criteria, give an example of how you can/do meet the criteria in providing services to children and/or families in your practice. Explain how, under the “advanced practice RN,” no. 5 might fit nicely into the school nurse role as case manager.
(Text: Selekman, pp. 75, 86, 122, 824, 1045. Publication: NASN booklet.)
6. Playground safety and the role of the school nurse. Take an opportunity to evaluate playground safety at one of your elementary school sites. What conclusions have you drawn regarding potential for harm? Discuss what is involved in a framework for playground safety and what would you include in a playground injury prevention plan for your school? Cover at least three important things that you would include in an in-service to teachers and staff.
(Text: Marx, Wooley, Northrop, Ch. 5. Selekman, pp. 654-659, 1066-1070, 1132-1136. Selected Readings; Hudson, S.; Olson, H. M. Website: OCLI or see CA Codes in N184 Documents section for H&S Code, 115725 and 115730.)
7. Jimmy, age 8, is brought into the nurse’s office by his mother who states that he has an extreme allergy to peanuts. As a school nurse, what steps will you take to keep Jimmy safe? Who will you notify? What safety measures will you put in place? Relate this to a nursing theory/model and standard(s) of school nursing practice. Attach an Emergency Action Plan. Comment on the impact food allergies have on school nursing practice.
(Text: Selekman, Ch. 28 (pp. 665-667). Selected Readings: Gaudreau,, J. M.; Weiss, C.; Stanislaus COE, Ch 4. Website: Food allergy)

8. Discuss legal guidelines for providing medication to pupils in school. Who administers/assists the student with taking medication at school? Which emergency medications can be administered by UAP (unlicensed assistive personnel) and which cannot? Along with recommended readings, review “Medication” postings, section of Business & Professional code, and related Ed codes located in the N184 Documents section, as well as CSNO position statement.
(Text: Selekman, pp. 1106-1110 and 1117-1120. Selected Readings: Canham, D. L.; CDE (1); Litarowsky, J.A.; Stanislaus COE, Ch 4. Websites: CSNO; OCLI.)
9. Discuss steps the school nurse will take in training UAPs (unlicensed school personnel) to assist children in taking medication and administering emergency medication in the absence of the nurse. Include training guidelines, competency issues and accountability.
(Text: Selekman, pp. 1106-1110, 1117-1120; Selected Readings: CSNO position statement; CDE guidelines; Clay, D.; Gursky, B.S.; Litarowsky, J.A.; Stanislaus COE, Ch. 15. Website: CSNO; OCLI, B& P Code section 2725.3 and Ed Code sections 49423, 49423.1, see also N184 Documents section.

Week 5, Assignment Reference Sources:

Textbooks/Publications:

California Department of Health Services (2005) Immunization Handbook

Cassinerio, P., Lowe, S; Glinskis, M. (2006). Health Services Manual. *Stanislaus COE*: Modesto, CA (See N184 Documents section.)

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

Selekman, J. (2006). School nursing: A comprehensive text. Philadelphia: F.A. Davis Co.

Websites:

American playground safety, <http://www.americaplayground.com/PlaygroundSafety.htm>

Americas safety playground report card,
http://www.playgroundsafety.org/research/report_card_form.pdf

American playground safety, <http://www.americaplayground.com/PlaygroundSafety.htm>

California Board of Registered Nursing (BRN) <http://www.rn.ca.gov/>

California Department of Education, www.cde.ca.gov (Ed. Code 49423)

California DHS, CHDP, www.dhs.ca.gov/pcfh/cms/chdp/chdpgateway.htm

California School Safety, www.cde.ca.gov/spbranch/safety

Cal-Osha (employee safety, other), www.calosha.com

Communicable Disease Control, www.cdc.gov

Food Allergies – www.foodallergy.org

National Program for Playground safety, www.uni.edu/playground

OCLI (Official CA Legislative Info) – codes, www.leginfo.ca.gov (B&PC 2725.3; Ed. Code 49423; H&SC 12033, 120340, 120365, 124105-d; CEC, 48216.)

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

California Board of Registered Nursing. (1973-1974). Article 2. Scope and Regulation. *California Nursing Practice Act*. Sacramento, CA: Author.

Canham, D. L., et al. (2007). An audit of medication administration: A glimpse into school health offices. *Journal of School Nursing*, 23(1), 21-27.

California Department of Education (1). (2006). *Program advisory on medication administration*. Sacramento, CA: Author, 1-8.

California Department of Education (2). (2006). *Laws, regulations, & recommendations – part two*. Sacramento, CA: Author, 1-4.

California Department of Health Services (1). (2006). *Child health and disability prevention program: Gateway Eligibility*. Sacramento, CA: Author, 1-3.

California Department of Health Services (2). (2006). *Child health and disability prevention program: Program overview*. Sacramento, CA: Author, 1-3.

California Department of Health Services (3). (2003). *Immunization requirements for school entry, forms, letters*. (includes information sheets, code citations). CSU, Fresno: Author, 2-25.

California Department of Health Services (4). (2003). *CHDP Assessment forms*. Sacramento, CA: Author (1-6).

California Department of Health Services (5). (March 2003). *Dear colleagues/Small Pox vaccine* (Letter and update on Small Pox). Author, 1-4.

California Department of Health Services (6). (April 2003). *Mini-update*. CSU, Fresno:

Author, 1-5.

- California School Nurses Organization. (2006). *Position statement on medication administration*. (2006). Sacramento, CA: Author, 48-49, 51-53.
- Clay, D., et al. (2008). Family perceptions of medication administration at school: Errors, risk factors, and consequences. *Journal of School Nursing*, 24(2), 95-102.
- Gaudreau, J. M. (2000). The challenge of making the school environment safe for children with food allergies. *Journal of School Nursing*, 16(2), 5-10.
- Greene, Alan. (October 2002). Vaccination fears: What the school nurse can do. *Supplement to the Journal of School Nursing*, 31-35.
- Gursky, B. S., Ryser, B.J. (2007). A training program for unlicensed assistive personnel. *Journal of School Nursing*, 23(2), 92-97.
- Hudson, S., Olsen, Heather, & Thompson, D. (2008). An investigation of school playground safety practices reported by school nurses. *Journal of School Nursing*, 24(3), 138-144.
- Litarowsky, J.A., Murphy, S.O.; Canham, D. L. (2004). Evaluation of an anaphylaxis training program for unlicensed assistive personnel. *Journal of School Nursing*, 20(3), 279-284.
- Olsen, H. M., Hudson, S. D., & Thompson, D. (2008). Developing a playground injury prevention plan. *Journal of School Nursing*, 24(3), 131-137.
- Stanislaus County Office of Education. (2006). Ch. 11, Immunizations. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)
- Stanislaus County Office of Education. (2006). Ch. 04, Administration of medication. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents section in Blackboard.)
- Stanislaus County Office of Education. (2006). Ch. 05, CHDP. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)
- Stanislaus County Office of Education. (2006). Ch. 15, Training of personnel. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Bb.)
- Weiss, C., et al. (2004). Impact if food allergies on school nursing practice. *Journal of School Nursing*, 20(5), 268-278.

Week 6, 9/27/10-10/1/10:

Outcome identification in school nursing practice; role of the school nurse in screening programs based on CCR and Ed. Code, vision, hearing, scoliosis, Acanthosis Nigricans; assessment of growth and development and BMI; identifying barrier to a healthy life style for children; physical assessment skills for the school nurse.

Note: Week 6, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Discuss the importance of identifying outcomes in school nursing practice. Elaborate on work done by the “School Nurses Corps” Health Services Program task force in Washington State. Include in your discussion examples of outcomes that you could realistically achieve, or strive to achieve in your own school nurse practice. Why are outcome measures are so important in school nursing?
(Text: Selekman, Ch. 11. Selected Readings: Adams, S.)
2. Discuss role of the school nurse in planning and conducting state mandated vision screening in CA schools. Incorporate sections of the CA Ed. Code related to qualification of screeners, screening, referral guidelines, tools, and recommended grade levels. What type of testing is required by the state and what other types of vision screening procedures might the school nurse choose to carry out? Comment on effectiveness of vision screening in schools.
(Text: Selekman, pp. 442-444, 522-529, 622-623. Publication: CDE guidelines 2005. Selected Readings: Clark, N; Fresno COE 2; Kimel, L.; Leman, R.; Miller, B. 2; Stanislaus COE, Ch 13; SN News; Websites: CDE, OCLI or See “State Mandated Screening in CA Codes in N184 Documents section.)
3. Discuss the role of the school nurse in planning and conducting state mandated hearing screening. Who is qualified to carry out hearing screening? (See CCR) At what grade levels should screening take place? Describe the testing environment, rescreening timelines, and the referral process. How often should an audiometer be calibrated? Briefly describe steps you would take to plan and carry out a school wide screening in an elementary school setting. How would Neuman’s Systems Model relate to screening?
(Text: Selekman, 293-294, 438-445, 619. Selected Reading: See related sections of Ed code and CCR code, as well as Neuman’s Systems Model, in N184 Documents section; Miller, B. 1 & 3; Stanislaus COE, Ch 13.)
4. Discuss hearing screening techniques for difficult to screen children. What does CCR (CA Code of Regulations) Title 5, 3028 say regarding guidelines for screening students in special education? Consider speaking with an experienced school nurse in a special education program for insight into methods, tools/techniques, referral, and follow-up.
(Text: Selekman, Ch 16; pp. 444-445. Selected Readings: CA Codes, N184 Documents section; Fresno COE (1); Miller, B. 1 & 3. Websites: CDE, type in ‘CCR.’)

5. In preparation to teach a lesson about a healthy lifestyle for students in 4th, 5th, or 6th grade, develop a chart of norms for this age group, including, nutritional intake, sleep requirements, and exercise. Briefly discuss related theories of development (Selekman, p. 363) and the CDE Health Framework related to learner readiness and the effectiveness of health education for these students. With this insight, develop a brief needs assessment survey you could distribute to these students to help you determine teaching emphasis. (Text: CDE, Health Framework; Selekman, Ch. 16 & pp. 363, 567-568, 835-839. Website, Kids Health.)
6. Screen heights, weights and BMI (body mass index) in a classroom of children you would normally screen in your school nursing practice. How do your findings compare with the norms for this age group, i.e. percentage of children above the 97%? How do your findings compare with national statistics related to obesity? What steps are being taken, or programs developed, in your district to address the problem? As a result, are you seeing habits changing? What are you doing as a school nurse to combat the problem?
(Text: Selekman, Ch 16, Ch 36, & pp. 439-442, 835-843. Selected Readings: Tyler, D. Website: Childhood obesity)
7. A 12 year old boy comes into your office complaining of chest pain. What are some questions you will ask him? Go through the assessment steps you will take to determine his problem. What are a normal temperature, blood pressure, heart rate and respirations for a boy his age? What are some variables to keep in mind when assessing the various vital signs? Describe the lung sounds indicating a problem with asthma, and describe three other breath sounds that indicate another type of respiratory problem. Describe 6 other signs and symptoms that indicate respiratory distress.
(Selekman, Ch. 16, 356-360; Ch. 23, 541-43.)
8. Discuss Acanthosis Nigricans and its relationship to insulin and Diabetes II. Describe the obvious physical signs of AN. Does research validate the importance of screening? Who are the students who are more likely to have AN? Summarize the screening guidelines indicated in the CA Ed. Code, section 4945.6. When and where does screening take place in your district? Describe referral process and success with follow-up by physicians in your area.
(Text: Selekman, Ch. 33. Selected Readings: Jones, L.; Miller, B. (1); Video, Blackboard N184 Document Section.
9. What is scoliosis? Cite Ed Code section related to screening and summarize contents. Describe key steps involved in planning and carrying out posture screening and at what grade levels. What are considered deviations from the norm that require rescreening and/or referral? Comment on other spinal abnormalities that may be identified. What are some issues to keep in mind when screening boys and girls?
(Text: Selekman, Ch. 20 & pp. 628-629. Publication, CDE, 2007; Selected Readings: CA Codes, N184 Documents section; Stanislaus COE, Screening. Website: OCLI, Ed Code section 49452.5; other websites below.)

Week 6, Assignment Reference Sources:

Textbooks/Publications:

- Cassinerio, P., Lowe, S; Glinskas, M. (2006). Health Services Manual. *Stanislaus COE*: Modesto, CA (See N184 Documents section.)
- CDE. (2005). *A guide for vision testing in CA public schools*. Sacramento, CA: Author
- CDE. (2003). *Health framework for California public schools: Kindergarten through grade twelve*. Sacramento, CA/Author.
- CDE, (2007). *Standards for scoliosis screening in CA public schools*
- Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

- CA Dept. of Education, www.cde.ca.gov for online publications noted above.
- CSNO (Position Statements), www.csno.org
- Childhood Obesity, <http://www.cdc.gov/HealthyYouth/obesity/facts.htm>
- Dyslexia, <http://www.medicinenet.com/dyslexia/article.htm>
- Kids Health, http://kidshealth.org/parent/nutrition_fit/fitness/exercise.html
- Laws related to school health, www.hkresources.org
- OCLI (Official CA Legislative Info) – codes, www.leginfo.ca.gov
- NASN (Position Statements), www.nasn.org
- Nursing theories, <http://www.sandiego.edu/academics/nursing/theory/>
- Scoliosis, www.scoliosis.org, www.scoliosis-world.com, www.spinesource.com
- Vision Service Plan (VSP), www.sightforstudents.org

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

- Adams, S. & McCarthy, A. M. (2005). Evidence-based practice and school nursing. *Journal of School Nursing*, 21(5), 258-265.

- Clark, N. et al. (2008). Use of noncyclopedic autorefractor to perform vision screening in preschool. *Journal of School Nursing*, 24(3), 158-163.
- Fresno County Office of Ed (1). (1992). *School nurse functional hearing observation*. Fresno, CA: Author, 1-2. (See N184 Documents section, Screening Tips)
- Fresno County Office of Ed (2). (1992). *School nurse functional vision observation*. Fresno, CA: Author, 1-2. (See N184 Documents section, Screening Tips)
- Fresno Unified School Dist. Dept. of Health Services. (2000). *Sight, sound, & dental assessment team*. Fresno, CA: Author, 1-14.
- Good-Lite Company. *Good-Lite Reading Card*. Forest Park, Ill: Author.
- Jones, L., Ficca, M. (2007). Is acanthosis nigricans a reliable indicator for risk of type 2 diabetes? *Journal of School Nursing*, 23(5), 247-251.
- Kimel, L. (2006). Lack of follow-up exams after failed school vision screenings: An investigation of contributing factors. *Journal of School Nursing*, 22(3), 156-162.
- Leman, R., et al. (2006). A comparison of patched HOTV visual acuity and photoscreening. *Journal of School Nursing*, 22(4), 237-243.
- Miller, B. (2) (2009). *Teacher observation* (vision problems). CSU Fresno: Author, 1-1. (See N184, Documents section, Screening Tips)
- Miller, B. (3) (1992). *What every school nurse should know about screening hearing*. (notes from presentation by Steven Rawiszer, State Hearing Conservation Specialist. Author, 1-1. (See N184 Documents section, Screening Tips)
- School Nurse News*. (Sept. 2000). When a student is found to be color vision deficient. Author, 12-14.
- Stanislaus County Office of Education. (2006). Ch. 13, Screening programs. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)
- Tyler, D. (2004). Overweight and perceived health in Mexican American children: A pilot study in a central Texas community. *Journal of School Nursing*, 20(5), 285-291.

Week 7, 10/4/10-10/8/10:

Community collaboration; School Health Index; helping students and families cope with stress; issues related to bullying, cultural competence; children of migrants and refugee families; school nutrition services; dental hygiene programs; physical assessment skills for the school nurse.

Note: Week 7, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. School nurses cannot be effective if they limit their scope of practice to the school building. Discuss ways that the school nurse can collaborate with community as partners in meeting the health care needs of clients and developing valuable programs that benefit both children and families. Relate this to Standard XI (Standards of Professional Practice). How can the CDE Health Index be useful?
(Text: NASN booklet. Selekmán, pp. 50, 83, 119-120, 426-232, 1063-1065.)
2. School Health Index. What is a SHI? Describe the eight different modules it includes and their relationship to the Coordinated School Health Model. Who is a likely SHI team leader? Who are the members who should be involved? Describe the purpose and function of the team. Has an SHI team been established in your school/district? If so, describe how it functions and the areas being addressed following SHI needs assessment. If the SHI is not being used in your school(s), do you see a need for its use? As a school nurse, how would you go about bringing awareness of that need?
(Text: Selekmán, pp. 49, 53-54. 855, 947-948, & 1064. Website: CDC.)
3. Discuss migrant education in California. Under which federal title does migrant education fall? Review and comment on sections of Ed code that relate to Migrant Education. Comment on educational issues regarding migrant children and graduation success rates. Contact your COE Migrant Program to find out about other services that may be provided in your area, i.e., assistance with referral for healthcare. Feel free to give examples of issues/ problems you encountered in trying to assist migrant families.
(Text: Selekmán, 401-408. Selected Readings: CA Immigrant Welfare Collaboration; Larson, K.L. Websites: CDE; OCLI, Ed Code sections 8230-8233, or N184 Documents section; Migrant.)
4. Discuss cultural competence versus cultural sensitivity. What does cultural competence incorporate? Define acculturation, assimilation, and ethnocentrism. What is the definition of transcultural nursing? The cultural care theory begins with the premise that nursing is a caring profession. Cultural care theory promotes three major care actions and decisions to arrive at culturally congruent care for the general clients well being. Briefly describe each.
(Text: Selekmán, Ch. 18. Selected Readings: Larson, K.L.)
5. Bobby, a 4th grade student is shy and small for his age. He frequently comes into the nurse's office during noon recess without a slip from his teacher complaining that he does

not feel well. The school nurse suspects that he is being teased or bullied. Discuss issues related to teasing and bullying. Compare the characteristics of bullies and victims. What are the effects of bullying? Discuss interventions that do and do NOT work. What steps could the school nurse take to help Bobby and other students like him in school? Is there a nursing theory that applies here?

(Text: Selekman, Ch. 39. Selected Readings: Hendershot, C.)

6. Helping students and families cope with stress. Discuss two family nursing theories that have evolved over time. Include family functions and structure in your discussion. Who is the “potentially at risk” child? Relate Neuman’s Systems Model in helping students and their families in their ability to cope. What are things the school nurse needs to keep in mind in realistically helping students and families navigate stressful situations?
(Text: Selekman, Ch 17 & pp. 332-333. Selected Reading: Morris, R.)
7. A frequent complaint of children coming into the health office is “stomachache.” Describe assessment steps using CIAMPEDS and QUEST mnemonics to determine possible problem. Discuss signs and symptoms of the most common abdominal emergency. What are some things to keep in mind regarding dehydration in children? Complaints of “stomachache” may also mask as a genitourinary problem. Describe genitourinary symptoms that require urgent care and teaching opportunities. Describe physical assessment steps for each.
(Text: Selekman, Ch. 22).
8. Discuss the essential functions of school nutrition services and responsibilities of school districts according to sections of the Ed. Code noted in N184 Documents section. What is the percentage of children in your elementary school(s) who qualify for free or reduced breakfast/lunch? How can the school nurse help to integrate school nutrition services into other components of a coordinated school health program?
(Text: Marx, Wooley & Northrop, Ch. 9. Website: OCLI.)
9. Discuss the steps in developing of a dental hygiene program in your school(s). Include in your discussion community partners, parent buy-in, and possible funding sources (grants, other). What grade level(s) would be targeted? What types of services would be included? What steps can you take to assist low income families in finding affordable dental care? Summarize contents of Ed Codes sections 51520-51521; H&SC sections 104770, 104815.
(Text: Selekman, Ch. 3, & pp. 350-351, 449, 536-538, 578-579. Selected Readings: FUSD dental screening program; Stanislaus COE, Ch. 13; Tetuan, T.M. Website: OCLI for Ed. codes or see N184 Documents section, CA Codes.)

Week 7, Assignment Reference Sources:

Textbooks:

Marx, Wooley & Northrop, Ch. 9 (School nutrition services)

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

California Department of Education, www.cde.ca.gov,
Legal and Legislative, CA law - Codes
Healthy Children, Youth & Families, Nutrition
Federal Education Programs, Title I & Title III
Teaching, Learning, Tech. – Programs, English learners, Emergency Immigrant

CDC (School Health Index) <http://www.cdc.gov/HealthyYouth/SHI/FAQ.htm>

Migrant Education, CDE, <http://www.cde.ca.gov/sp/me/mt/programs.asp>

Migrant Issues, http://www.californiaprogressreport.com/2009/04/bill_requires_i.html

Migrant Health resources, http://www.raconline.org/info_guides/public_health/migrant.php

Migrant Education, National, <http://www.ed.gov/programs/mep/index.html>

OCLI (Official California Legislative Information), www.leginfo.ca.gov

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

California Immigrant Welfare Collaboration. (March 1998). *Immigrants and “public charge.”* (Includes letter from Dept. of Health and Human Services).
Los Angeles, CA: Author, 1-4, 1-3.

Fresno Unified School District. (1990). Dental program (Includes setting up for dental inspection, sample reports, handouts, codes citations.), *FUSD Procedure Manual*,
Fresno, CA: Author, 2000-2010.

Hendershot, C., et al. (2006). Elementary school nurses’ perceptions of student bullying. *Journal of School Nursing*, 22(4), 229-235.

Larson, K. L. & McQuiston, C. (2008). Walking out of one culture into another: Health concerns of early adolescent Latinos. *Journal of School Nursing*, 24(2), 88-94.

Morris, R.I., Strong, L. (2004). The impact of homelessness on the health of families. *Journal of School Nursing*, 20(4), 221-227.

Stanislaus County Office of Education. (2006). Ch. 13, Screening programs. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)

Tetuan, T., McGlasson, D., & Meyers, I. (2005). Oral health screening using a caries detection device. *Journal of School Nursing*, 21(5), 299-306.

Week 8, 10/11/10-10/15/10:

The role of the school nurse in managing health care and related emergencies; First Aid; chronic health conditions such as asthma, diabetes I, Sickle Cell Disease, Pediculosis control; communicable disease prevention; and tuberculosis screening programs.

Note: Week 8, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. The school nurse must be prepared to respond to any health-related emergency. What level of school nurse competency is needed? How does NASN define the role of the school nurse in emergencies? What does EMS pediatric emergency preparedness include? What are the components of a health-related emergency response plan? Discuss a plan that should be in place in the absence of the nurse.
(Text: Selekman, Ch. 22 & 664-665. N184 Documents Sect: Adapting standards of care under extreme conditions.)
2. Outline the assessment and first aid steps the school nurse will take in managing the following traumatic injuries: Head injury, eye injury, traumatic avulsion of a permanent tooth, a compound fracture, a chemical burn on a forearm, and a possible ankle sprain.
(Text: Selekman, Ch. 22 and pp. 522-529, 578-579. Selected Readings: CSNO First Aid Flipchart; Krause-Parello, C. A.; other sources of choice.)
3. Discuss asthma management in the school setting. Describe signs and symptoms, triggers, categories of medication and their use. Include an Emergency Action Plan for teachers and staff. Relate Ed Code section related to self-carrying an inhaler. Review district policy to determine alignment with Ed Code. Comment on NASN/CSNO position statements on self-medicating. How does your school district deal with “bad” air days?
(Text: Selekman, Ch. 29 & 189, 360. Selected Readings: American Lung Assoc.; Flower, J.; Pulcini, J.; Winkelstein, M.L. Websites: noted below.)
4. Discuss trends in treatment of Diabetes I and interventions in the school setting. Share an actual IHP and Emergency Action Plan on a child with Diabetes I that you have developed on an actual child, or develop a mock IHP/EAP (must use standardized language). Comment on school nurse collaboration with teachers, staff, and school food services. Who is able to administer insulin at school? Back up your response with sources. Express your concerns.
(Text: Selekman, Ch. 33 & pp. 177-182, 245-253. Publications: NASN; NNN. Websites: CSNO; OCLI, B&P code 2725.3. N184 Documents section, court decision on insulin administration.)
5. Marvin is a 11 year old 6th grade boy with a diagnosis of Sickle Cell Disease. Describe the condition, and emergency signs and symptoms. What are additional problems that may arise as a result of SCD? Include in your discussion impact on learning, and the role of the school nurse in educating teachers and staff. Using standardized language, create

an IHP (Individual Healthcare Plan) and an EAP (Emergency Action Plan). Apply use of Neuman's Systems Model to nursing interventions.

(Text: Selekman, Ch. 27 & pp. 177-182, 245-253, 630. Publications: NASN; NNN.

Selected Readings: Day, S.; Lancaster, D, Week 2. Websites: Merck Manual, Sickie Cell.)

6. Discuss the role of the school nurse as an educator in controlling the spread of communicable diseases in the school setting. How effective is proper hand washing in controlling germs? Outline a hand washing program plan you could consider presenting to administrators that would involve collaboration with teachers in grades K-3. What does Code section 51880 say about control of communicable disease in school setting. (Text: Selekman, Ch. 21. Selected Readings: Harkavy, L. M.; Rodriguez, S.; Stanislaus COE, infectious diseases. Website: OCLI, or see N184 Documents section, CA Codes.)
7. Discuss measures for controlling Pediculosis in school. Include practical screening methods, teacher/student/parent education, effective treatment, issues with chronic re-infestation in some families, and confidentiality. What do the CSNO/NASN position statements have to say regarding a nit policy? What is your opinion regarding a realistic nit policy? Comment on Ed. Code section 51880 that may apply. (Text: Selekman, Ch. 26. Selected Readings: Sciscione, P.; Stanislaus COE, infectious diseases. Websites: CSNO/NASN; OCLI or N184 Documents section, CA Codes.)
8. Discuss the role of the school nurse in managing of circulatory emergencies. Include in your discussion types of circulatory emergencies and assessment steps. What are the early signs of circulatory compromise? Give several examples of degrees of trauma that could cause multiple systems damage. Include in your discussion interventions for shock and sudden cardiac arrest. Include steps in use of an AED. Comment on training that has taken place in your schools to prepare others to use the AED. (Text: Selekman, Ch. 22.)
9. Discuss Tuberculosis and the disease process in children verses adults. Include timing and method for reading a Mantoux skin test (PPD). When is a skin test considered questionable? When is it positive? What is the usual length of time medication is prescribed for a positive PPD verses active disease? Comment on issues related to compliance. What are some important points to make when educating school personnel about how and when disease is spread? What is your district policy regarding TB skin testing? Consult your local health department about prevalence in your area. (Text: Selekman, 446-448. Selected Readings: Davis, J.; National TB Center; Stanislaus COE, Ch 12. Website: National TB Center.)

Week 8, Assignment Reference Sources:

Textbooks/Publications:

California School Nurses Organization. (2001). Communicable disease flipchart. Sacramento, CA: Author.

National School Nurses Association. (2005). Using nursing languages in school nursing practice. Silver Spring, MD: Author.
Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

Asthma and allergies, www.schoolasthma.com

Asthma and music as an effective teaching tool, <http://www.mdmdinc.com>
or E-mail at StopAsthma@aol.com

California Department of Education (codes), www.cde.ca.gov

Diabetes, children with in schools, http://www.childrenwithdiabetes.com/d_0q_000.htm

Tuberculosis, www.umdj.edu/ntbc

Ed. Codes/other, records/confidentiality, www.cde.ca.gov & www.leginfo.ca.gov

CSNO (Position Statements), www.csno.org

NASN (Position Statements), www.nasn.org

National TB Center, <http://www.nationaltbcenter.edu/>

Laws related to school health, www.hkresources.org

Merck Manual, <http://www.merck.com/mrkshared/mmanual/home.jsp>

OCLI (Official California Legislative Information), www.leginfo.ca.gov

Pediculosis, www.headlice.org

Sickle Cell, www.SCInfo.org; <http://www.sicklecelldisease.org/>

Tuberculosis, <http://www.medicinenet.com/tuberculosis/article.htm>

Other health conditions see websites in manual appendix and in Blackboard.

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

American Lung Association of Central CA. (2002). Some possible asthma triggers, inhalers, peak flow meter use instruction. Central CA: Author, Other, 1-12.

Davis, J. (April 4, 2001). *Woman jailed for TB will get \$1.2m*. Fresno Bee, 3-3.

- Day, S., & Chismark, E. (2006). The cognitive and academic impact of sickle cell disease. *Journal of School Nursing*, 22(6), 330-335.
- Flower, J., Saewyc, E. M. (2005). Assessing the capability of school-age children with asthma to safely self-carry an inhaler. *Journal of School Nursing*, 21(5), 283-292.
- Harkavy, Lorraine. (October 2002). Role of surface disinfection and hand hygiene in reducing illness. *Supplement to the Journal of School Nursing*, 5-7.
- Krause-Parello, C. A. (2005). Tooth avulsion in the school setting. *Journal of School Nursing*, 21(5), 279-282.
- National Tuberculosis Center. *School Nurse Handbook*. New Jersey: Author, 1-30.
- Pulcini, J., DeSisto, M., & McIntyre, C. L. (2007). An intervention to increase the use of asthma action plans in schools: A MASNRN study. *Journal of School Nursing*, 23(3), 170-176.
- Rodriguez, S. (October 2002). The importance of school-based hand washing programs. *Supplement to the Journal of School Nursing*, 19-22.
- Sciscione, P. & Krause-Parello, C. A. (2007). No-nit policies in schools: Time for change. *Journal of School Nursing*, 23(1), 13-20.
- Stanislaus County Office of Education. (2006). Ch. 12, infectious disease. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents section in Blackboard.)
- Winkelstein, M. L. et al. (2006). Asthma education for rural school nurses: Resources, barriers, and outcomes. *Journal of School Nursing*, 22(3), 170-177.

Module Three, October 18 - November 12, 2010

The Nursing Process * NANDA Nursing Diagnosis * Individual Health Care Plans * Health Promotion * Health Education Programs * Cultural Differences * Poverty and Dysfunctional Families * Learning Disabilities * Child Abuse * IDEA * 504 Plans *

Note: For Module Three, along with questions, students will also complete a Cross Cultural Book Report on *The Spirit Catches You and You Fall Down* by Anne Fadiman or conduct a Cross Cultural Interview. See Assignments guidelines in N184 Syllabus (p. 15).

Week 9, 10/18/10-10/22/10:

The Nursing Process; NANDA Nursing Diagnosis and standardized language; Individual Health Care Plans, Emergency Action Plans; caring for children with ADHD, cycle of childhood obesity; seizures, Cystic Fibrosis, Diabetes I, Allergic Rhinitis, Encopresis, and Sickle Cell Disease.

Note: Week 9, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Discuss importance of sound documentation and use of standardized nursing language in school nursing. Define N3 (Nanda, Nic, and Noc) and their use in school nursing practice. To demonstrate your understanding of standardized nursing language, develop an Individual Healthcare Plan for Jeffery, age 10, who takes medication for moderate to severe asthma, or use an actual student in your SN practice. Include IHP with your paper. (Text: NASN; Selekman, pp. 177-182, 245-253.)
2. Mark, age 9 years, a slender unkempt child is sent to your office by his teacher who states that he is disruptive in class and seems unable to concentrate on his work. His mother is a working single parent with four younger children. Using the nursing process, what steps will you take to help Mark and his mother? Highlight some key points related to diagnostic criteria for ADHD. Develop an Individual Healthcare Plan using standardized language and apply a nursing theory. (Text: NASN; Selekman, Ch. 30 & pp. 178, 182, 245-246, 912-913. Selected Reading: Dang, M.T.; Heller, K. H. Websites related to ADHD below.)
3. Melissa, a 3rd grade child is moderately obese. Discuss the vicious cycle of childhood obesity, genetic factors, dietary habits, activity patterns, and impact on health, self-esteem and success in school. Discuss the screening process and how you would go about plotting a BMI for Melissa? How will you work with Melissa and her family? Include an

Individual Healthcare Plan using standardized language.

(Text: NASN; Selekman, Ch. 36 & pp. 178, 182, 245-246. Selected Readings: Gance-Cleveland, B.; Heller, K. H.; Moyers, P.)

4. William is an 8-year old child who has a poorly controlled Complex-Partial Seizure condition. Diastat Rectal Gel has been ordered in the event of a seizure at school. Describe this type of seizure activity. Comment on CSNO/NASN position statements regarding administration of emergency medication. Discuss concerns regarding administration of Diastat, by whom and why. What is your district policy on administration of Diastat? Develop an Emergency Action Plan for teachers and staff. (Text: Selekman, Ch. 37 & pp. 178, 182, 245-246, 506-507. Selected Readings: Heller, K. W.; Madera COE; O'Dell, C.; other medical information sources of choice. Websites: CSNO; NASN.)
5. Jeff, age 9 years, has a diagnosis of Cystic Fibrosis. Discuss key issues related to pathophysiology and major management concerns. In light of Neuman's Systems Model (N184 Documents section), discuss the role of the school nurse as it relates to nursing interventions and support given to the student and family. Comment on important information that should be shared with the classroom teacher. Develop an Individual Healthcare Plan using standardized language. Is a 504 plan a consideration? (Text: NASN; Selekman, Ch. 32 & pp. 178, 182, 245-246. Selected Readings: Tapper, M.S. Website noted below.)
6. Johnny, age 11, has recently been diagnosed with Diabetes I. Discuss the impact this diagnosis may have on a pre-teen and issues related to the honeymoon phase. Include a likely insulin regime and dietary plan. How can the school nurse support Johnny and assist him with self-management at school? Develop an Individual Healthcare Plan and an Emergency Action Plan using standardized language. Is a 504 plan appropriate? (Text: NASN; Selekman, Ch. 33 & pp. 178, 182, 245-246. Selected Readings: Padre Foundation. Websites noted below.)
7. Jimmy is 11 years old and has recently been diagnosed with Allergic Rhinitis. Discuss early phase response triggers, and signs & symptoms. Discuss environmental and medical management. Give 3-4 examples of types of medications that may be tried to treat the condition including immunotherapy. Since there is risk of systemic reaction with immunotherapy, how should the school nurse be prepared? Develop an Emergency Action Plan to safeguard this student, include with paper. (Text: Selekman, Ch. 28. Website noted below.)
8. Sammy, age 7 years, has a problem with encopresis. Briefly discuss the pathophysiology of encopresis. Describe the steps the school nurse will take related to the nursing process. How can the school nurse work with the family and the teacher to resolve the problem? Develop an Individual Healthcare Plan using standardized nursing language. What type of documentation might be involved? Would one or all of the following be appropriate, why or why not? A mental health referral? A nurse-client contract? A 504 plan?

(Text: Selekman, pp. 76-81; 182-203. Publication: NASN. Selected Readings: Papenfus, H. A. Website below.)

9. Billy, age 10 years, has a diagnosis of Sickle Cell Disease. Discuss the pathophysiology of this condition and what is involved in Sickle Cell Crisis. Discuss important information that needs to be shared with the teacher and staff, as well as things the student needs to keep in mind regarding his condition. Develop an Individual Healthcare Plan using standardized nursing language and a Emergency Action Plan.
(Text: NASN; Selekman, pp. 504, 618, 630. Selected Reading: Day, S. Website below.)

Week 9, Assignment Reference Sources:

Text/Publications:

National School Nurses Association. (2005). Using nursing languages in school nursing practice. Silver Spring, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia: F.A. Davis Co.

Websites:

ADD and ADHD (Children and Adults with) – www.chadd.org

ADD and ADHD – www.chadd.org , www.aacap.org

Allergic Rhinitis, <http://www.healthscout.com/ency/68/208/main.html>

American Academy of Allergy, Asthma, Immunology, <http://www.aaaai.org>

American Academy of Pediatrics, <http://www.aap.org>

Anxiety/Panic Disorders, www.nami.org/helpline/anxiety.htm

Asthma and allergies, www.schoolasthma.com

CSNO (Position Statements), www.csno.org

Cystic Fibrosis, www.cff.org

Diabetes, <http://www.aap.org>

Diabetes, National Diabetes Education Program (education materials), <http://ndep.nih.gov/>

Encopresis, http://www.emedicinehealth.com/encopresis/article_em.htm

Epilepsy, www.epilepsyfoundation.org

Epilepsy, www.kidsource.com/NICHCY/epilepsy.html

Epilepsy Foundation of America, www.efa.org

Food Allergy and Anaphylaxis Network, <http://www.foodallergy.org>

Laws related to school health, www.hkresources.org

NASN (Position Statements), www.nasn.org

Sickle Cell Disease, www.SCInfo.org; <http://www.sicklecelldisease.org/>

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Dang, M. T. (2007). A school-based approach to early identification and management of students with ADHD. *Journal of School Nursing*, 23(1), 2-12.

Day, S. (2006). The cognitive and academic impact of Sickle Cell disease. *Journal of School Nursing*, 22(6), 330-335.

Gance-Cleveland, B. Bushmiaer, M. (2005). Arkansas school nurses' role in statewide assessemtn of body mass index to screen for overweight children and adolescents. *Journal of School Nursing*, 21(2), 64-69.

Heller, K. W. & Tumlin, J. (2004). Using expanded individualized health care plans to assist teachers of students with complex health care needs. *Journal of School Nursing*, 20(3), 150-159.

Madera County Office of Education. (2004). *First aid guidelines for seizures in the classroom setting: Medication at school – diastat rectal gel* (example). Madera, CA: Author, 1-2.

Moyer, P., Bugle, L., & Jackson, E. (2005). Perceptions of school nurses regarding obesity in school-age children. *Journal of School Nursing*, 21(2), 86-91.

O'Dell, C., O'Hara, K., Kiel, S., McCullough, K. (2007). Emergency management of seizures in the school setting. *Journal of School Nursing*, 23(3), 158-165.

Papenfus, H. A. (1998). Encopresis in the school-aged child. *Journal of School Nursing*, 14(1), 26-31.

Tapper, M.S., Wellendorf, J. (2004). Caring for children with Cystic Fibrosis: A collaborative clinical and school approach. *Journal of School Nursing*, 20(1), 5-11.

Week 10, 10/25/10-10/29/10:

Health education, a component of coordinated school health system; conceptual model for health teaching and learner readiness; effective teaching methods; National standards and CA health framework; developing health education programs; family and community involvement; health promotion for faculty and staff.

Note: Week 10, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. An important component of a coordinated school health program is health education. What do research findings suggest with regard to the benefits of health education in school? List the eight characteristics of effective curricula. List and define the four unifying ideas of health literacy and list the nine content areas. What role should the school nurse play in health curriculum planning and development? How can the school nurse become involved?
(Text: Marx, Wooley & Northrop. Publication: CDE, Health Framework, Ch. 1)
2. Discuss a conceptual model for effective teaching that relates to learner readiness and the school nurse as educator. Incorporate into your discussion a short statement about each of the following that sums up their purpose: Key elements of measurement criteria related to Standard 5B (Scope & Standards of Practice), CDE Health Framework for CA Public Schools, and CDE Ed Code sections noted in Appendix A of CDE publication.
(Text: Selekman, Ch. 7. Publication: CDE, Health Framework with Ed Code sections.)
3. List the ten top requirements for effective teaching. Go to the learning theories website noted below, share key points related to 3 learning theories that you could use for health teaching. Glean through the American CA Society *National Health Education Standards*, CDE *Health Education Content Standards K-12* and the CDE *Health Framework for California Public Schools K-12*. In a quality paragraph for each, comment on the usefulness of these resources in developing health curriculum and lesson plans.
(Text: Marx, Wooley, Northrop, Ch. 3. Publications: CDE - health framework, see N184 External Links; Amer. CA Society – Nat. standards and CA standards, see N184 Documents section. Selected Readings: Leblanc, R. Website: Learn theories.)
4. Reviewing the CDE *Health Education Content Standards K-12* and the *Health Framework for CA Public Schools K-12* (also Ed Code sections in Appendix A) as these relate to elementary health education. Speak with the curriculum coordinator in your district to find out what health curriculum is being taught at various grade levels, share

this insight. Compare your findings to CDE health education guidelines in the publications that you reviewed. Do you think that the health education at the elementary level is adequate? Comment on your SN role as a health educator.
(Publications: CDE, see N184 Documents section and External Links. Website: CDE.)

5. Write a proposal for a healthy lifestyle health education program you could actually present to an administrator that would target overweight preadolescent girls. Thinking in terms of a coordinated school health program that could include other professionals, departments, or community. Read a recent research article related to the problem and reference it in your proposal, as well as grade appropriate learner readiness found in the CA Health Framework. Include a brief outline of your proposed program.
(Text: Marx, Wooley, Northrop, Ch 4; Selekman, Ch. 3 & 36. Publication: CDE.
Selected Readings: Denehy, J.; Eliason, K.; Weepie, A. W.)
6. Discuss ways school, families and community can work together to strengthen student success in school. What are some key elements that must be taken into consideration in obtaining family commitment? What are some challenges to family involvement? Give an example of a health education program that could involve family and community and a brief explanation of how it might work. Comment on content in Ed. Code section 51891 regarding community.
(Text: Marx, Wooley, & Northrop, Ch. 4; Selekman, 426-432. Website: CDE, coordinated school health.)
7. As a school nurse, it is your responsibility to in-service school faculty/staff on safety measures to take regarding blood borne pathogens. Research the subject matter and develop a teaching outline you can actually use for your own in-service. Who will be included in your target audience? Comment on the details of how, where, when you will plan your presentation. Relate this in-service to Cal-Osha.
(Text: Selekman, 471-472, 1025. Selected Readings: Elliott, S.; Kukka, C.; Stanislaus COE, Ch. 13. Website: Cal-Osha.)
8. Discuss health promotion for school faculty and staff. What do staff wellness programs typically involve? Discuss the benefits of worksite health promotion programs. Discuss action steps you will take to plan and implement a school-site health promotion program. What are the challenges for successful programs and key concepts to guide future efforts? Read through Ed Code sections related to health education and comment on how these relate to health promotion for faculty and staff.
(Text: Marx, Wooley & Northrop. Ch. 10; Selekman, pp. 1057-1059, 1062-1063-1065. Websites: CDE.)
9. Discuss the use of evaluation and survey data in developing school health education programs. What factors should be considered in planning a survey? Develop an actual

survey that you could use with students or staff to determine health education needs. Discuss two evaluation models. Include things that should be taken into consideration in developing a successful program and learner readiness at different grade levels? (Text: Selekman, Ch. 7, pp. 1062-1065; Publication: CDE, Health Framework, Ch. 1.)

Week 10, Assignment Reference Sources:

Textbooks/Publications:

American Cancer Society. (2005). *National Health Education Standards*. Atlanta, GA: Author. (N184 Documents section)

California Department of Education (2003). *Health Framework for CA Pubic Schools: Kindergarten through grade twelve*. Sacramento, CA: Author. (N184 External Links)

California Department of Education (2009). *Health Education Content Standards for California Kindergarten through grade twelve*. Sacramento, CA: Author. (N184 Documents section)

Marx, E., Wooley, S. F., Northrop, D. *Health is academic*. New York: Teachers College Columbia University.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

American School Health Association (educational materials), www.ashaweb.org/pubs/

California Department of Education (Health Framework), www.cde.ca.gov

Cal-Osha,(blood borne pathogen in-service information), www.calosha.com

Coordinated School Health Programs Resources:

<http://www.chef.org/cshp.htm>

<http://www.cdc.gov/nccdphp/dash/cshpdef.htm>

<http://www.californiahealthykids.org>

CSNO (Professional growth materials/Position Statements), www.csno.org

Healthy Kids Resource Center (educational materials catalog) www.californiahealthykids.org

Learning theories, http://www.emtech.net/learning_theories.htm

Learning theories, <http://tip.psychology.org/theories.html>

NASN (Professional growth materials/Position Statements), www.nasn.org

National Dairy Council (educational materials),
<http://www.nationaldairycouncil.org/nationaldairycouncil/tools>

National Health Ed Standards <http://www.cdc.gov/HealthyYouth/SHER/standards/index.htm>

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Eliaison, K. & True, A. (2004). Combining health promotion classroom lessons with health fair activities. *Journal of School Nursing*, 20(1), 50-53.

Elliott, S. (2000). *Bloodborne Pathogens: Organizing presentations for faculty/staff* (sample). CUSD, Clovis, CA: Author, 1-5.

Kukka, C. (2004). Bloodborne infections: Should they be disclosed? Is differential treatment necessary? *Journal of School Nursing*, 20(6), 324-329.

Leblanc, R. (1998). Good teaching: the ten top requirements. Author, *The Teaching Professor*, 1-1.

Stanislaus County Office of Education. (2006). Ch. 13, Screening programs. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)

Weepie, Anna K. W. & McCarthy, M. (2002). A healthy lifestyle program: Promoting child health in schools. *Journal of School Nursing*, 18(6), 322-328.

Week 11, 11/1/10-11/5/10:

Behavior issues: anxiety disorders, Tourette syndrome, children with autism, school phobia and absenteeism; poverty and homelessness; children of dysfunctional families; cultural competence; transcultural differences; gifted children; child abuse reporting.

Note: Week 11, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Anxiety disorders. Briefly describe the different types of anxiety disorders, including signs and symptoms that may be seen in young elementary school age children. Marta, age 6, has been brought by her teacher to the health office because she is complaining of a stomachache. She has been listless and withdrawn in class. Her grandmother recently passed away with whom she spent a great deal of time and Marta wants to go home. Using the nursing process, discuss steps the school nurse will take to help Marta. What are important points to keep in mind in counseling young children?
(Text: Selekman, Ch. 34; pp. 74-81. Websites noted below.)
2. Tommy age 10 has a diagnosis of Tourette syndrome. Discuss etiology; signs and symptoms; impact on self-esteem and learning; and pharmacotherapy. Discuss things that the school nurse can do to support Tommy and his family. What are some tips the school nurse can share with his teacher to strengthen his self-esteem and aid learning?
Is Tommy eligible for any types of services and/or programs? Why or why not?
(Text: Selekman, Ch.14; pp. 795-797. Selected Reading: Coming, D. E. Websites below.)
3. Discuss educational and health issues related to poverty and homelessness. What is the scope of the problem today? What guidelines are used in school districts to determine children that qualify for free lunch? Include barriers to care and the role of the school nurse. Discuss issues related to access to care issues in your area. Where can you refer low income families?
(Text: Selekman, pp. 328-330, 344, 368; 385-386. Selected Readings: Morris, R. I; Ed Code sections on disadvantaged children and school nutrition programs, N184 Documents section. Website: CA-DHS)
4. What is autism? Describe the communication deficits, impaired social interaction and cognitive function that are associated with autism. Discuss the TEACCH approach to helping these children learn. What are the legal guidelines in place to ensure that attention is paid to providing the appropriate programs and services? How are these children served in your own school district? Discuss the role of the school nurse and issues related to assessment and screening.
(Text: Selekman, Ch. 14; pp. 801-804. Selected Reading: Galinat, K. Websites below.)

5. Discuss issues related to school refusal and health-related absenteeism. Give a definition of school phobia and discuss the basis for this fear. Compare factors related to delinquency with those related to school phobia. Discuss the role of the school nurse in assessment, intervention and prevention for each.

(Text: Selekman, pp. 789, 1122-1125. Selected Readings: Tyrrell, M.)

6. Discuss cultural competence as it relates to a specific population you work with in your own area (Chinese, Hispanic, Hmong, other). Include in your discussion, 5 significant cultural differences that differ from your own, i.e. spiritual beliefs, family values, child rearing practices, verbal and non-verbal communication, dietary habits, health practices, etc. Are there medical-legal issues or barriers to medical care for this group? Compare your school nurse role to Campinh-Bacote's conceptual model of cultural competence. Comment on your strengths and areas that need improvement.

(Text: Selekman, Ch. 18. Selected Readings: Cheung, R. Website: Search for specific cultural groups.)

7. Read through the transcultural theories/models related to cultural competence in Selekman Chapter 18. Choose two to discuss and compare the differences. Point out aspects of each that you can relate to in working with children and families of a culture other than your own. Give an example of overcoming road blocks you have encountered in trying to help a child/families of a different culture. Will this added insight help you in your school nurse practice?

(Selected Readings: Selekman Ch. 18.)

8. What are some characteristics associated with the gifted child? Discuss the history and basis for gifted and talented education. Share insight gained into what should be included in programs for the gifted learner (see Ed Code sections 52200-52212, N184 Documents section). Where does the gifted learning-disabled child fit into the picture? Include in your discussion, health issues that may be associated with these children.

(Websites: OCLI; gifted and talented children; see below.)

9. Child abuse reporting. Who is responsible? Jacob's teacher brings him into your office. She tells you that he told her that his stepfather hit him with a belt across his back. She asks you to look for bruises. You find what appear to be belt marks across his back and shoulders. His teacher states that he frequently comes to school smelling of urine and that his clothes are often badly soiled. What is P.L. 104-235? What codes apply? Discuss the role of the school nurse. Who is responsible for reporting in this case?

(Text: Selekman, pp. 928-934. Selected Readings: BRN; CA Dept. Social Services; Miller, B.; Stanislaus COE, Ch 6; Villagomez, V. Website, reporting.)

Week 11, Assignment Reference Sources:

Textbooks/Publications:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Anxiety/Panic Disorders, www.adaa.org/, www.nami.org/helpline/anxiety.htm

California DHS, CHDP, www.dhs.ca.gov

Child abuse reporting, http://www.smith-lawfirm.com/mandatory_reporting.htm

CSNO (Position Statements), www.csno.org
culturally different families. *Best Practices in School Psychology*, 1049-1059.

Gifted and Talented Education, <http://www.cde.ca.gov/sp/gt/lw/>

Gifted and Talented Education, <http://www.cde.ca.gov/sp/gt/gt/>

Gifted and Talented Children, http://www.ri.net/gifted_talented/character.html

Gifted children and ADHD, <http://www.athealth.com/consumer/disorders/adhdgifted.html>

Gifted/yet learning disabled child, <http://www.acps.k12.va.us/tag/ldgifted.php>

Gifted child and health, http://giftedkids.about.com/od/socialissues/qt/mental_day.htm
Laws related to school health, www.hkresources.org

Flanagan, D. P. & Miranda, A. H. (1992). *Best practices in working with*

Leininger's Transcultural Nursing Model, <http://www.sandiego.edu/academics/nursing/theory/>

National Committee for Prevention of Child Abuse, www.childabuse.org

National Federation for the Blind, www.nfb.org

Nat'l Information Center for Children & Youth with Disabilities, www.nichcy.org

NASN (Position Statements), www.nasn.org

OCLI (Official California Legislative Information, www.leginfo.ca.gov

Tourette Syndrome Association, <http://www.tsa-usa.org/>

See other websites in the document section on Blackboard.

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

- Board of Registered Nursing. (1973-1987) Chapter 6, nursing article 2, Scope of Regulations. Excerpt from California Code of Regulations. The RN as patient advocate. Sacramento, CA: *Nursing Practice Act*. (See N184 External Links)
- Cheung, R., Nelson, W., Advincula, L. & others. (2005). Understanding the culture of Chinese children and families. *Journal of School Nursing*, 21(1), 3-9.
- Galinat, K., Barcalow, K., & Krivda, B. (2005). Caring for children with autism in the school setting. *Journal of School Nursing*, 21(4), 208-215.
- Morris, R.I., Strong, L. (2004). The impact of homelessness on the health of families. *Journal of School Nursing*, 20(4), 221-227.
- Stanislaus County Office of Education. (2006). Ch. 06, Child protection. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)
- Tyrrell, M. (2005). School phobia. *Journal of School Nursing*, 21(3), 147-157.

Week 12, 11/8/10-11/12/10:

Office of Civil Rights; IDEA and other laws that protecting rights of individuals with disabilities; Student Study Team; 504 Plans; health conditions that impact learning, ADHD, vision and hearing problems, severe allergies, acting out and other behaviors.

Note: Week 12, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Discuss the purpose of Public Law PL 107-110-No Child Left Behind Act of 2001 and the four pillars specific to the law. Is NCLB working according to Margaret Spellings? What is California doing to meet NCLB responsibilities? Speak with an administrator in your school district to find out how your schools are meeting requirements. What is the role of the school nurse?
(Selekman, pp. 306, 1036-1037. Selected Readings: Constante, C. Websites: OCR; CDE.)
2. When did the U.S. begin enacting laws to support special education? Briefly describe key federal laws protecting individuals with disabilities. What is the role of the Office of Civil Rights? What rights can students expect? List five key district requirements under IDEA and five responsibilities of school health services for the student with healthcare needs. What must the school nurse be prepared to do as a member of the IEP team?
(Selekman, Ch. 14. Websites: IDEA, OCR)
3. What is Section 504 of the Rehabilitation Act of 1973? What does the term “accommodating” refer to with regard to placement? Does a student have to fit into a disability category to qualify for a 504? Would any student with a disability qualify? Give an example of a student who would qualify under OHI. What should be the determining factor in placing a student on a 504 Plan? Succinctly describe the U.S. Department of Education OCR rules for students. Who should be included on a 504 team? Briefly describe your own experience as a member of a 504 team.
(Text: Selekman, Ch. 14. Website, IDEA, OCR.)
4. What are the steps involved in developing a 504 plan? Speak with an experienced school nurse to gain insight into the 504 process in your district. What is the role of the school nurse in initiating and participating in the process and as a member of the SST (Student Study Team)? Who are the members of a SST? Give an example of a student who would qualify for a 504 and describe the 4 areas that should be addressed in an Accommodation Plan, when the plan should be reviewed again and who should receive a copy of the plan.
(Text: Selekman, Ch. 9, 195-203 and Ch. 14. Website, IDEA.)
5. Briefly define ADHD. Discuss issues related to a teacher’s demands that a child be medicated for “ADHD.” Include in your discussion criteria that must be present for a

diagnosis. List 6 non-pharmacological interventions that the school nurse can recommend to the classroom teacher to help the child. Describe 2-3 medications often used in treatment of ADHD, dosage, action, and benefits, side effects. Discuss the steps involved in the development of a 504 plan. Comment on legality and purpose.
(Text: Selekman, Ch. 14, 30, & 195-203. Selected Readings: Rubin, R. Websites below.)

6. Allen, age 7 years, has been referred by his teacher to the SST (Student Study Team). He has a history of disruptive behavior and poor performance in school. Discuss school nurse assessment steps, possible findings, and what information should be shared with the SST. Comment on usual make up of team. Assuming that Allen is diagnosed with ADHD and qualified for a 504 Plan, summarize what you would anticipate will be written up in that plan. Discuss the likely role of the school nurse in helping Allen. What legal rights/protection does he have with a 504?
(Text: Selekman, Ch. 14, 30 & pp. 195-203; Websites: OCR, IDEA.)
7. Rodney is a 4th grader with strabismic amblyopia whose has 20/20 R. and 20/200 L. vision without glasses. He has a long history of refusing to wear glasses. His grades are above average. Briefly describe the vision problems associated with strabismic amblyopia and screening techniques used in diagnosis. Is he a candidate for a 504/ a formal contract? Why or why not? Are there 504 guidelines that may apply to this situation? What recommendations will the school nurse make to his teacher, parent/ guardian and note in his health record?
(Text: Selekman, Ch. 14, & pp. 442, 522-526, 622-623, 912-913. Websites: OCR, IDEA).
8. Joey has a history of upper respiratory allergies and a transient hearing loss. He is a bright boy, but he is not paying attention in class and he is below grade level in performance. His teacher has made a referral to the SST (Student Study Team). Briefly summarize issues related to learning as a result of allergies and transient hearing loss. Is he a candidate for a 504? If so, why? Discuss the role of the school nurse in the area of assessment, referral, and follow through in preparing for the SST meeting. What recommendations will the school nurse have for the team?
(Text: Selekman, Ch 14, & pp. 444-445, 619-623, 654-657. Websites: IDEA; OCR.)
9. Jerry, a 3rd grade student, has been acting out in class. He throws things across the room and antagonizes/disrupts other students at work. His teacher has come to the school nurse for some help. Summarize what is involved in the ABC Model and Functional Behavioral Assessment/Analysis. List the categories related to questions that the school nurse will want to investigate with teacher and parents. What assessment steps will the school nurse take? What recommendations might the nurse make to the teacher for altering Jerry's behavior? Is a SST referral in order? Is Jerry a candidate for a 504? Would a Formal contract or a token economy system work for him? Explain your answer.
(Text: Selekman, Ch. 38.)

Assignment Reference Sources:

Textbooks/Publications:

California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

ADD and ADHD (The Learning Disabilities Project) – www.ldonline.org

ADD and ADHD (Children and Adults with) – www.chadd.org

ADD and ADHD, www.chadd.org , www.aacap.org and www.nimh.gov

California Department of Education, www.cde.ca.gov

Nursing theories, <http://www.sandiego.edu/academics/nursing/theory/>

Office of Civil Rights, <http://www.ed.gov/about/offices/list/ocr/index.html>

IDEA '97, <http://www.ed.gov/offices/OSERS/Policy/IDEA/>

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Costante, C. C. (2006). School health nursing services role in education: The No Child Left Behind Act of 2001. *Journal of School Nursing*, 22(3), 142-147.

Rubin, R. L. (2004). *Recognition of new developments in ADHD treatment: What parents should know*. NASN 36th Annual Conference, Speaker Syllabus Abstract, 295-301.

Module Four, November 15 – December 10, 2010

Special Education * IEP Process * Interdisciplinary Collaboration * Legal and Ethical Issues * Confidentiality * Special Ed. Screening and Assessment * Early Intervention * Specialized Physical Health Care * Supervision of Care

Week 13, 11/15/10-11/19/10:

Special education, IEP (Individual Education Program) process; the IEP team and interdisciplinary collaboration; Individual Health and Support Plans; SELPA (Special Education Local Planning Area); mainstreaming; families and the grieving process.

Note: Week 13, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1.
According to the CA Education Code, California reflects federal legal guidelines in meeting the special education needs of children in our state. List and briefly describe the six principles of special education services in CA. Describe what a SELPA (Special Education Local Planning Area) is and its responsibilities. Which agency takes responsibility for the SELPA in your county? How are children in need of special education services identified? Find out about state diagnostic centers. Which state department is responsible for them and how are children selected for evaluation? (Text: Selekman, pp. 309-314, 634-643. Websites: SELPA; State Diagnostic Centers; OCLI, or N184 Documents section, for Ed Code sections 56000, 56001, 56026, 56031, 56300-56302.)
2. Describe the IEP process in determining placement for a child according to Education Code sections 56320-56329. Include legal timelines, responsibilities of each individual on the multidisciplinary team, parent involvement and rights. Interview a school psychologist or resource specialist at your school to gain insight into the various types of testing conducted on students to determine appropriate placement. What does a evaluation summary report include? (Text: Selekman, Ch. 9 and pp. 191-194. Selected Readings: Stanislaus COE, Ch 14. Website: OCLI or N184 Documents section for Ed. Code sections 56320-56329.)
3. Discuss the role of the school nurse as a participant on the multidisciplinary education team, using the nursing process and the steps in box 14.7 in Selekman p. 311. Take each step and relate it to an action step you took, or plan to take, in working up a child with some health issues for an initial IEP meeting. What are the school nurse's responsibilities with regard to a written and oral report? How do you think your input as a school nurse is

valued by other members of the team?

(Text: Selekman: 191-194, 309-312. Selected Readings: Stanislaus COE, Ch 14.)

4. Tommy is a 10 year old wheelchair bound paraplegic with a history a spinal cord injury. He is transferring into a regular 5th grade from out of district. He has a history of resource specialist services. There are orders for clean self catheterization at school. Discuss the school nurse role, the initial steps with regard to personal needs, need for other possible services, paperwork, and reports for an upcoming IEP meeting. Develop an IHP (Individual Healthcare Plan) related to catheterization needs. Include scanned copy of IHP and written report for IEP team.
(Text: Selekman, pp. 177-195. Selected Reading: Stanislaus COE, Ch 14. Website: OCLI or N184 Documents section for Ed. Code section 56325).
5. Jimmy, age 14 years, is transferring into to a SDC at the 8th grade level from another SELPA. He has right hemiplegic cerebral palsy and his IQ is in the mildly retarded range. He is able to walk with difficulty and uses a motorized wheelchair. He will require wheelchair access and assistance with toileting. He has a right strabismus and recently dropped and broke his glasses. Discuss initial steps the school nurse will take and paperwork needed for an upcoming IEP meeting. Develop an IHP for Jimmy using standardized language. What should be included in an IEP after age 14 years?
(Text: NASN; Selekman, Ch. 31, & pp. 177-195, 634-643. Selected Reading: SCOE, Ch 14. Website: OCLI or N184 Documents section for Ed. code section 56325)
6. Johnny is a 7 year-old child in the 2nd grade. There is a history of a serious auto crash and head injury with loss of consciousness for several days. He experienced several seizures while in the hospital. He is returning to school after a six-week absence. His mother reported to the teacher that he has difficulty following directions at home and has a problem remembering things. Assuming he will be referred to the SST (Student Study Team), discuss your assessment steps, contacts, and paperwork you will prepare for the meeting. Develop an Emergency Action Plan based on possible future seizure activity.
(Text: Selekman, pp. 74-80, 177-195, 505-506, 579-582, 632-634. NASN. Website: for H& D history taking, see website or go to N184 External Links.)
7. Discuss health and developmental history taking. Include establishing rapport and types of interview questions needed to obtain meaningful information from a parent/guardian and give several examples. What is the best means by which to obtain a health and developmental history? What information should tastefully not be written down and/or shared in an IEP meeting? List the different types of multidisciplinary team meetings and the type of information the school nurse would be expected to share at each, i.e., complete health history, health history update, simple assessment, IHP, none, etc.
(Text: Selekman, pp. 76-80. Selected Readings: Stanislaus COE, Ch 14. Website: for H & D history taking, see website below or go to N184 External Links)

8. Bobby is a 6-year-old with Down syndrome. He is in the moderately retarded range. His Ht. is 100 cm/Wt. 30 kg. He has a history of a mild bilateral low frequency hearing loss, and a problem with atlantooccipital instability of the neck. He is a client of a local regional center. His mother has requested that he be mainstreamed into a regular kindergarten. Discuss the pros and cons of mainstreaming and concerns related to his health and safety. Develop an IHP using standardized language addressing health issues.
(Text: NASN; Selekman, pp. 177-193, 635-643, 815-816. Websites: Down Syndrome; Regional Centers.)

9. It is so important to try to put yourself in someone else's shoes such as the parent of a child with exceptional needs. Discuss attitudes and stages of grieving that parents experience in coming to grips with having a child with special needs. Reflect on experiences you may have had with parents of these children in your own school nursing practice and/or your own feeling if you have a special needs child. What are the stressors and impact on family members when there is a special needs child in the family. Discuss ways that the school nurse can help these parents and be that advocate at the IEP table.
(Websites: Cohen, M. A.; Kuber Ross; Thacker, S.)

Week 13, Assignment Reference Sources:

Textbooks/Publications:

California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I

National School Nurses Association. (2005). *Using nursing languages in school nursing practice*. Silver Spring, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Affects of a Handicapped Child on a Family by Marcia Cohen,
<http://www.yale.edu/ynhti/curriculum/units/1982/6/82.06.08.x.html#f>

Brain Injury Association, www.biausa.org

California Dept. Of Ed (Disabled students), <http://www.cde.ca.gov/ls/cs/k3/consider.asp>

California Code of Regulations, <http://www.oal.ca.gov/ccr.htm>

CDE (state) Diagnostic Centers, www.dc-cde.ca.gov

California Special Education programs: a composite of laws (Ed. Codes relating to Special Education), <http://www.cde.ca.gov/sp/se/>

CSNO (Position Statements), www.csno.org

Down Syndrome, National Association of, <http://www.nads.org/>

Down Syndrome – Health Issues, <http://www.ds-health.com/>

Health & Developmental History Taking,
<http://children.state.mn.us/mdeprod/groups/EarlyLearning/documents/Manual/001329.pdf>

Impact of a handicapped child on the family, by Marcia A. Cohen
<http://www.yale.edu/ynhti/curriculum/units/1982/6/82.06.08.x.html#f>

Kubler Ross Grief Cycle,
http://changingminds.org/disciplines/change_management/kubler_ross/kubler_ross.htm

Laws related to school health, www.hkresources.org

OCLI (Official CA Legislative Information), www.leginfo.ca.gov
For Ed. Codes – click on CA Law, then Ed. Codes, type in number of code sought

NASN (Position Statements), www.nasn.org

Office of Special Education and Rehabilitation Services,
<http://www.ed.gov/about/offices/list/osers/osep/index.html>

Regional Centers for developmentally delayed persons (CVRC, example) <http://www.cvrc.org/>

SELPA (example of), <http://www.tulareselpa.org/>

State Diagnostic Centers (CV example), <http://www.dcc-cde.ca.gov/>

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

Stanislaus County Office of Education. (2006). Chapter 14, students with special needs.
Stanislaus County Office of Education Health Services Manual. Author. (See N184 Documents in Blackboard.)

Week 14, 11/29/10-12/3/10:

Standard 12, Ethics; ethical theories; ethical decision making and problem solving; foster children in the system; early childhood intervention; IFSP (Individual Family Service Plans); SDC teachers and school staff perceptions of the school nurse role.

Note: Week 14, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Discuss what being ethical is and what it is not. Include in your discussion the two primary approaches to ethical decision making. What are the principles inherent in all ethical decisions? Give an explanation of each. What must a school nurse consider and share as a member of a school decision-making team? If you have been involved in a ethical dilemma, briefly comment on that experience.
(Selekman, pp. 1110, 1114-1115, 166-167. Selected Readings: NASN, Standard 12. Websites: OCLI, B&P Code sections 2725-2742)
2. School Nursing, Standard 12. Ethics. Read through Standard 12 measurement criteria. What does ethical behavior involve according to Standard 12? What does the *Code of Ethics for Nurses* (ANA 2001) state about nurses and assuming responsibility? Does the CA Nursing Practice Act require that nurses be advocates for their patients/clients? Is the role of advocate for children and families just good practice or are you legally bound? What should the school nurse consider sharing with other members of the educational team related to meaningful decision-making?
(Text: NASN, Selekman, Ch. 4, & pp. 1110, 1114-1115, 166-167. Websites: OCLI, B&P Code sections 2725-2742)
3. Read through the situations for decision-making and problem solving found in *Exploring Ethical Challenges in School Health* by Aroskar and *An Ethical Dilemma in School Nursing* by Levitt & Taylor. Discuss the key points in each and the insight that you have gained. What you would have done in a similar situation?
(Selected Readings: Aroskar, M.; Levitt;)
4. Joey, a 3rd grade student, confides in the school nurse that his new foster parents are “mean” to him. There is no outward evidence of abuse or neglect though Joey does appear quite anxious. The foster father teaches 6th grade in this same school. Joey pleads with you not to tell his foster father that he “told.” Discuss health issues and concerns related to foster care children in general. What is the definition of an ethical quandary? Is this an ethical quandary, or just an uncomfortable situation? What are some things/consequences to consider? Discuss steps you would take in resolving this situation.

(Text: Selekman, pp. 292-293, 328, 386-387. Selected Reading: Aroskar, M.; Schneiderman, J. U.; Solum, L.; Stanislaus COE, Ch. 6.)

5. Standard 14: Resource Utilization. This standard may be seen as an extension of a discussion on ethical standards regarding the legal duty of client advocacy. The language in this standard makes it clear that the school nurse is to choose the best for clients and help parents make the best decisions based on service needs. Read through the measurement criteria and select five criteria that you can relate to as a school nurse in meeting the needs of a medically fragile child or otherwise needy child. This could be through collaboration, cost effective resource utilization, training personnel and assignment of tasks, and/or helping a parent obtain affordable health care services. (Text: Selekman, p. 86. NASN, pp. 36-37.)
6. Upon what federal law is Early Childhood Intervention based? What is an Individual Family Services Plan and to whom does it apply? List the basic elements of early intervention noted in the law. Read through CA Ed Code section 56441.11 for insight into eligibility criteria for children with special needs age 3-5, summarize categories of findings. List and briefly explain some tests that could be administered and other measurement criteria for assessing a preschool child. What does the Ed Code say about preschooler readiness with regard to transitioning into kindergarten (section 56445)? (Text: Selekman, pp. 194, 302--306, 316-317, 332, 334, 903-909. Selected Readings: FCOE; Lewis, K.D.; Stanislaus COE, Ch. 14. Website: OCLI, or N184 Documents section, for Ed Code sections 56441.11 and 56445.)
7. Review IDEA PL 101-119 (1991). Summarize what the CA Ed Code has to say about the purpose and the services provided to special needs children 0-3 years of age. What are the established medical disability criteria for children to qualify for early intervention services? Discuss the services available to families and list the continuum of early intervention service delivery options? Include in your discussion transitioning steps from early childhood special education services to a program for preschoolers 3-5 years of age. Who are the members of the transdisciplinary team? What is the school nurse role? (Text: Selekman, pp. 303-306; Stanislaus COE, Ch. 14. Website: OCLI, or N184 Documents section, for Ed. Code sections 56425-56430.)
8. Julie, 18 months, has a history of prenatal exposure to substance abuse. Her foster mother has requested that she be evaluated. As a school nurse, you have been asked to make a home visit with an early intervention team. Discuss your role regarding assessment, likely tests and tools to use. Comment on testing likely to be done by other members of the team. What cognitive, language, social and emotional, and gross motor skill would you expect to see in a child her age? What criteria would qualify her for services? Comment on the type of service plan that will be put in place for Julie and when it will change. (Text: Selekman, Ch. 16 & pp. 188-194, 303-306, 316-317. Selected Readings: Brown,

J.; FCOE; Stanislaus COE, Ch 14. Website: OCLI or N184 Documents section, for Ed. Code sections 56425-56430, 56441.11.)

9. Read through the articles noted. Discuss the SDC (Special Day Class) teacher's perception of role of school nurse. Compare the SDC teacher's perception of satisfaction with services that of regular school staff in the other article. List the five role concepts related to SDC teacher's perception and comment on the importance of each. What nursing services were most important to the SDC teacher? Ask a SDC teacher and other school staff at your own school about their perspectives on the most valuable school nursing services you provide. Share your findings.
(Selected Readings: Leier, J.; Winland, J.)

Week 14, Assignment Reference Sources:

Textbooks/Publications:

California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I

National School Nurses Association. (2005). *Using nursing languages in school nursing practice*. Silver Spring, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Week 6 Selected Readings (vision and hearing screening/functional screening, FCOE).

Websites:

California Special Education programs: a composite of laws (Ed. Codes relating to Special Education), – www.cde.ca.gov/spbranch/sed/index.htm

IDEA '97, <http://www.ed.gov/offices/OSERS/Policy/IDEA/>

OCLI (Official CA Legislative Information), www.leginfo.ca.gov

For Ed. Codes – click on CA Law, then Ed. Codes, type in number of code sought

CSNO (Position Statements), www.csno.org

Muscular Dystrophy Association, www.mdausa.org

NASN (Position Statements), www.nasn.org

National Association for the Deaf, www.nad.org

Special Education, www.cde.ca.gov/spbranch/sed/index.htm (Early Intervention)

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

- Aroskar, M. A. (2001). Exploring ethical challenges in school health. *Legal Issues in School Health Services*, 81-93.
- BRN. (1973-1987) Chapter 6, nursing article 2, Scope of Regulations. Excerpt from CA CRR. The RN as patient advocate. Sacramento, CA: *Nursing Practice Act*. (See N184, Documents section for codes.)
programs – infant. CSUF student presentation, 1-23.
- Fresno County Office of Ed (1). (1992). *School nurse functional hearing observation*. Fresno, CA: Author, 1-2. (See N184 Documents section, Screening Tips)
- Fresno County Office of Ed (2). (1992). *School nurse functional vision observation*. Fresno, CA: Author, 1-2. (See N184 Documents section, Screening Tips)
- Leier, J., Cureton, V. Y., Canhan, D. L. (2003). Special day class teacher's perceptions of the role of the school nurse. *Journal of School Nursing*. 19(5), 294-300.
- Levitt, E. & Taylor, S. (1999). An ethical dilemma in school nursing, *Journal of School Nursing*, 15(4), 19-24.
- Schneiderman, J. U. (2004). The health of children in foster care. *Journal of School Nursing*, 20(6), 343-351.)
- Solum, L. L. and Schaffer, M. A. (2003). Ethical problems experienced by school nurses. *Journal of School Nursing*, 19(6), 330-337.
- Stanislaus County Office of Education. (2006). Chapter 14, students with special needs. *Stanislaus County Office of Education Health Services Manual*. Author. (See N184 Documents in Blackboard.)
- Stanislaus County Office of Education. (2006). Ch. 06, Child protection. *Stanislaus County Office of Education Health Services Manual*: Author. (See N185 Documents in Blackboard.)
- Winland, J. & Shannon, A. (2004). School staff's satisfaction with school health services. *Journal of School Nursing*, 20(2), 101-106.

Week 15, 12/6/10-12/10/09:

The value of collaboration in school nursing practice; chronically ill and medically fragile children; special physical health care needs; supervision and training of unlicensed assistive personnel; DNAR (Do not attempt to resuscitate); infectious disease control in medically fragile population; program placement.

Note: Week 15, students are to select one (1) of the following (clusters of) questions to research and write up on their own after learning which 2 (clusters of) questions have been selected by presenters for Blackboard presentations for this week. See syllabus for discussion guidelines following Blackboard presentation by fellow students.

Questions:

1. Standard 11: Collaboration. This is the process that involves working together to obtain common goals. Review the measurement criteria associated with the standard. Reflect on a student in your school nursing practice that required that you collaborate extensively with education team members, other professionals, parents, and/or community services in order to meet the child's health related needs. Referencing the measurement criteria that apply, explain how you met the needs of this child through collaboration. List the six "R's" of participation. Comment on the value of collaboration in your SN practice. (Text: NASN; Selekman, Ch.19.)
2. Discuss the guidelines for specialized physical health care services. Include definition of supervisor and types of supervision. Who is responsible for designating the individuals who are to provide special physical health care services? Who determines that individual's competency and level of supervision needed? In California, are tasks "delegated" or "assigned"? Elaborate on the role of the school nurse. (Text: Selekman, pp. 634-645, 1106-1110. Selected Readings: CSNO, /Greenbook; Miller, B., 2001; Stanislaus COE, Ch 15. Websites: NASN/CSNO position statements.)
3. Outline important steps to take in training unlicensed assistive personnel to provide specialized physical health care procedures? What are the five "rights" that nurses must use as a guideline for assigning tasks? Who is responsible for competence of the individual trained? What is the responsibility of the school nurse in the event a care provider is hired from outside an outside agency and has been trained by that agency? Include in your discussion needed documentation. (Text: CSNO, greenbook; Selekman, 1106-1110. Selected Readings: B&P Code 2725.3, see N184 Documents section; CSNO/NASN position statements; Miller, B., 2001; Stanislaus COE, Ch. 15. Websites: CSNO, NASN.)
4. An IEP team has convened to decide what to do about Jerry, an 8th grade RSP student who threatened another student with a knife at school. He has a diagnosis of ADHD and takes Ritalin daily at noon. What are the guidelines regarding suspension of Special Ed. students? What type of input is needed from the school nurse at the IEP meeting?

(Regarding suspension and expulsion go to *CA Special Ed. Programs: Composite of Laws* at the website noted below and type in the word “Suspension.”)

5. DNAR (Do Not Attempt to Resuscitate). Define DNAR. Briefly summarize history and background. Does your school district have a policy related to DNAR? If so, share your findings. What are acceptable measures that can be taken for a student with a DNAR on file? Discuss issues and concerns. Go to the CSNO and NASN websites to read through position statements found there and comment on your findings. Can a school district be sued if it refuses to honor a DNAR?
(Text: Selekman, pp. 1128-1130. Selected Readings: CSNO; NASN.)
6. What is MRSA? Discuss signs, symptoms, causes, risk factors, and treatment. What are some communicable disease control measures that need to be taken in a classroom setting with medically fragile pupils? What do standardized precautions involve? Are more stringent precautions required in working with children with this diagnosis?
(Text: Selekman, 470-471, 749. Websites: CDE; Mayo Clinic.)
7. Terry is a severely delayed 6 year-old boy who is wheelchair bound with Cerebral Palsy. He has a history of aspiration pneumonia due to the fact that he is unable to chew his food well and has problems swallowing. Discuss feeding issues for children with CP. Terry has no known food allergies. Develop an IHP (Individual Healthcare Plan and an Emergency Action Plan for Terry. Who will the school nurse collaborate with to help Terry and keep him safe?
(Text: Marx, Wooley, & Northrop, pp. 202-203; Selekman, p. 737. Selected Readings: Miller, B., 2000.)
8. Discuss issues related to the pupil who is technology dependent. How does the Assistive Technology Act of 1998 define these devices? Bryant and Bryant (2003) listed questions that can help to determine the need for a specific device. Comment on five of those questions that you as a school nurse may frequently want to ask a technology dependent child. Select three types of devices to discuss that you can relate to children in your own practice. Include your concerns and responsibility as a school nurse.
(Text: Selekman, 623-626)
9. Discuss the different types of Special Ed. programs offered in your school district and briefly describe each type program. Visit a SDC (special education class). Prior to the visit, create a list of questions that you can use to interview the teacher. Spend at least one hour observing interaction between students and teacher. Share your experience and the insight you gained from the experience. How did this experience broaden your understanding for some problems/issues teachers and students face in special education?
(Text: Selekman, 634-643.)

Week 15, Assignment Reference Sources:

Textbooks/Publications:

California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I

Marx, Wooley, & Northrop, pp 202-203 (School nutrition services).

National School Nurses Association. (2005). *Using nursing languages in school nursing practice*. Silver Spring, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Code of Regulations, <http://www.oal.ca.gov/ccr.htm>

California Department of Ed. Special Ed. mission, goals, values
www.cde.ca.gov/sbranch/sed/sedmsion.htm

California Special Education Programs: A Composite of Laws (CDE website)
http://www3.scoe.net/speced/laws_search/searchLaws.cfm

CDC, http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca_public.html

Code of Federal Regulation, <http://www.archives.gov/federal-register/cfr/subject-title-18.html>

CSNO (Position Statements), www.csno.org

Guidelines and procedures for meeting the specialized physical health care needs of pupils, www.cde.ca.gov & www.csno.org

Legal guidelines, www.cde.ca.gov/spbranch/sed/index.htm

CSNO (Position Statements), www.csno.org

Mayo Clinic <http://www.mayoclinic.com/health/mrsa/DS00735>

NASN (Position Statements), www.nasn.org

Public Law 90480, <http://www.unm.edu/~dolguin1/Legislation%20Laws.htm>

Spina Bifida Association of America, www.sbaa.org

Selected Readings (See CSUF Madden online journal access or Electronic Reserve):

- Leier, J., Cureton, V. Y., Canhan, D. L. (2003). Special day class teacher's perceptions of the role of the school nurse. *Journal of School Nursing*. 19(5), 294-300.
- Miller, B. (2000). *Children with disabilities requiring special meals or feeding assistance*. Author, for FUSD, 1-5.
- Miller, B. (2001). Sample *guidelines for orientation of medical caregivers in school* (from outside agencies), FUSD, 1-3.
- Stanislaus County Office of Education. (2006). Chapter 14, students with special needs. *Stanislaus County Office of Education Health Services Manual*. Author. (See N184 Documents in Blackboard.)
- Stanislaus County Office of Education. (2006). Chapter 15, Training personnel. *Stanislaus County Office of Education Health Services Manual*. Author. (See N184 Documents in Blackboard.)
- Winland, J. & Shannon, A. (2004). School staff's satisfaction with school health services. *Journal of School Nursing*, 20(2), 101-106.

Syllabus: NURS 186
School Nurse Practicum I
Fall 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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B. Miller-7/10

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(Note; These page numbers do not correspond with this Program Assessment Document)

DEPARTMENT OF NURSING

Course Number: Nursing 186
Course Title: School Nurse Practicum (Elementary)
Units: 3 Unit Class (Total hours – 135)
Semester: Fall Semester only
Delivery: Class participation online through Blackboard/clinical at school sites

Prerequisites: NURS 184 - Introduction to School Nursing (or concurrently)
CSD 131, Audiometry for School Nurses and Audiometrist Certificate
NURS 136 - Health Appraisal
NURS 137 - Health Teachings
COUN 174 or 200
SPED 120 (Mainstreaming)

Note: Approval must be obtained from the program coordinator to take prerequisites concurrently with core courses or to take equivalent prerequisite courses at another university.

Faculty:

Nancy Busch, RN, MA
Office: McLane Hall, 288
Office hours: By appointment only
FAX: (559) 278-1013
E-mail: nbusch@csufresno.edu

Candace Hilvers, RN, MSN, PNP, NCSN
Office: McLane Hall 288
Office Hours: By appointment only
Email: chilvers@csufresno.edu

Nursing Department: CSU Fresno Department of Nursing
2345 E. San Ramon Ave. M/S MH 25
Fresno, CA 93740-8031
Phone: (559) 278-2041. FAX: (559) 278-6360

Catalog Description:

Elementary level school nursing experience including special education; direct supervision by a credentialed school nurse required; scheduled conferences with preceptor and instructor. (9 clinical hours/week)

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N186 COURSE OUTLINE, FALL 2010

Documents and Assignment Due Dates

Saturday 8/14/10	Orientation Day on CSUF campus, McLane Hall, 7:45 A.M. to 3:30 P.M. Get Acquainted Luncheon, University Restaurant, 12:30-1:50 P.M.
Monday 8/23/10	First day of class
<i>Due Date</i>	<i>Assignments</i>
Tuesday 9/7/10	<u>Hard copies of the following must be mailed or faxed:</u> * Immediate Supervisor Approval for Employee to act as Preceptor (Preceptor Syllabus – doc. 1) * Preceptor Vitae if not already on file with the university (Preceptor Syllabus – doc. 2) * Preceptor/Student Clinical Contract, signed by both parties (Preceptor Syllabus – doc. 3) * Exp. School Nurse Project Proposal form signed (if student eligible). Send with Mod. I (p. 27) Note: University/Agency Agreement MUST be in place before clinical practice can begin!
All journaling and assignments, unless otherwise indicated, must be sent using ‘Assignment Drop Off’ in N186 on Blackboard	
Monday 9/20/10 Wks 1-4	Module I: Planning and Development of Student Goals and Learning Objectives *Outlined Student Goals and Learning Objectives (p. 11) *Initial journal entries to include the following: Initial meetings with preceptor, first impressions, plans, clinical experiences if begun. (p. 14) * Responses to the 2 journal questions for Module I (p. 15) *Personal contributions to discussion on Blackboard, 3 quality paragraphs per wk X 4 wks (p. 17)
Monday 10/18/10 Wks 5-8	Module II: Clinical Experience toward Meeting Goals and Learning Objectives * 2 nd clinical journal entries (p.14). If applicable, Exp. Nurse Project progress report due (p. 12) * Responses to the 2 journal questions for Module 2 (p. 15) * Personal contributions to discussion on Blackboard, 3 quality paragraphs per wk x 4 wks (p. 17)
Networking	Students are encouraged to: attend CSNO conferences/ local school nurse meetings to network and strengthen connections; plan a networking luncheon with classmates in your area during the semester; inviting your preceptors to lunch at the end of the semester as an

	expression of thanks.
10/4/10 to 11/12/10	Mid-Term: Evaluation of Progress toward Goals and Learning Objectives * Write brief mid-term self evaluation and incorporate it into Module III journaling (p. 13) * Review/revise Student Goals and Learning Objectives with preceptor input, copy to instructor * 3-way Conference between clinical instructor, preceptor, and student (p. 13)
Friday 11/12/10	Selected Assignment: <i>Health Teaching Plan Outline</i> or highlights of <i>Policy/Procedure paper</i> (P. 19-20) must be shared in forum opened on Bb Discussion Board. Complete assignment to be sent with other Module III.
Monday 11/15/10 Wks 9-12	Module III: Progressing toward Completion of Goals and Learning Objectives * 3 rd clinical journal entries (p.14). If applicable, Exp. Nurse Project progress report due (p. 12) * Responses to the 2 journal questions for Module 3 (p. 15) * Selected assignment (Health Teach or Policy/Procedure paper) (p. 19-20) * Personal contributions to discussion on Blackboard, 3 quality paragraphs per wk x 4 wks (p. 17)
11/22-26/10	Thanksgiving Week
Monday 11/29/10	Case Study: Cross Cultural/ <i>Special Ed. Case Study</i> (p. 21). Electronic copy to be sent through Bb Assignment Drop Off.
Monday 12/13/10 Wks 13-15	Module VI: Completion of Student Goals and Objectives, Clinical Competencies * 4 th clinical journal entries (p.14). If applies, Experienced Nurse Project due (p. 12). * Responses to the 1 journal question for Module 4 (p. 15) * Personal contributions to discussion on Blackboard, 3 qualify paragraphs per wk x 3 wks (p. 17) * Final Narrative Self Evaluation related to clinical experience (p. 14) <u>The following MUST be sent via U.S. mail or faxed before the end of the semester:</u> * Preceptor Evaluation of Student Professional Dispositions (document #4, Preceptor Syllabus) * Preceptor Evaluation of Student Clinical Competencies (document #5, Preceptor Syllabus) * Preceptor Checklist of Clinical Skills, initialed & dated by preceptor (Preceptor Syllabus) * Preceptor Evaluation of Clinical Course (document #6, Preceptor Syllabus) <u>Students MUST respond to following and return via Bb drop off in NURS186</u> * Student Evaluation of Course (mailed from Dept. of Nursing prior to end of semester) * Student Evaluation of Preceptor Experience (emailed to students prior to end of semester)

COURSE OBJECTIVES

Upon completion of the course, the student will be able to:

1. Apply Neuman's Systems Model and other appropriate theories in the provision of elementary school nursing services.
2. Incorporate current applicable research into school nursing practice.
3. Analyze the components of a comprehensive school health program and contribute to the formulation of school health policies.
4. Demonstrate ability to function in the multifaceted role of the school nurse based on legal guidelines and ethical considerations.
5. Utilize the nursing process in providing appropriate and culturally sensitive health care to school age children, i.e., develop individualized health care plans.
6. Participate in interdisciplinary collaboration to promote the health, development, and educational needs of students.
7. Demonstrate ability to promote wellness in students, staff, and parents through health education programs and effective use of community resources.
8. Utilize effective communication skills with students, families, and staff.
9. Demonstrate ability to function as a member of a school interdisciplinary team to design interventions for children with special needs (e.g., special education, gifted programs, specialized physical health care, behavior problems, ADD, child abuse).
10. Demonstrates ability to supervise ancillary school health service personnel.
11. Function competently as a manager of health care in the school setting.
12. Structure learning activities to meet own individual clinical growth and competency needs.

LEARNING ACTIVITIES

Within a supervised clinical practice, the student will plan individualized clinical experiences, complete a case study, participate in the IEP process, develop and carry out a lesson plan or participate in the development of health policy, research issues and conduct interviews to obtain information relevant to clinical practice, keep a journal of clinical activities, and participate in electronic discussion board activities and faculty-student conferences.

COURSE REQUIREMENTS

Important note: There must be a signed Student Intern Agreement between CSUF and the school district where the clinical experience will take place before a student can make final arrangements with a preceptor. Email Patty Madrigal in the CSUF Department of Nursing, at pattymcsufresno.edu to verify the existence of an agreement or to provide the name, mailing address, email, fax, and telephone number of the responsible administrator or superintendent in that school district with whom an agreement must be made. Also, before a school nurse can act in the capacity of a preceptor, his/her immediate supervisor must sign the Immediate Supervisor Approval of Employee to Act as Preceptor form found in the Preceptor Syllabus.

Immunization Requirements BEFORE clinical experience can begin:

1. Tetanus/Diphtheria Vaccine within past 10 years
2. Hepatitis A Vaccine/Titer
3. Hepatitis B immunization series/Titer
4. Measles immunization requirement, see enrollment admission packet information.
5. TB skin test within 6 months of entering N186 (practicum I).
6. Varicella Vaccine/Titer

Items that must be on file with the university BEFORE clinical experience can begin:

1. University/Agency Agreement MUST be in place.
2. Signed *Immediate Supervisor Approval of Employee to Act as Preceptor* (Doc.1)
3. Preceptor Vitae on file with the university. (Must be renewed after four years.) (Doc.2)
4. Signed *Student/Preceptor Clinical Contract*. (Preceptor Syllabus) (Doc. 3)
5. Preliminary School Nurse Services Credential obtained from County Office of Ed.
6. CPR certification, (copy). Keep current throughout practicum experience.
7. RN license (copy). Keep current throughout practicum experience.
8. Public Health Nurse Certificate (copy).
9. Audiologist Certificate (copy).
10. Not necessary to provide malpractice insurance as this will be included in cost of course.

(See Preceptor Syllabus for documents 1, 2, and 3.)

Note: For a school nurse to qualify as a preceptor, he/she must hold a clear School Nurse Services Credential and been employed as a school nurse for a minimum of five full years. If your preceptor has acted in this capacity within the last four years, a new vitae does not have to be submitted, however, check with the program coordinator or your N186 clinical instructor to be sure there is a vitae on file with the university.

REQUIRED TEXTS AND PUBLICATIONS

(Note: Many of these publications are the same as those required for NURS 184.)

- Miller, B. (2009). *Nursing 186 Syllabus*. Fresno, CA: CSUF School Nurse Services Credential Program. (approx. cost: \$3.50)
- Miller, B. (2010). *Nursing 186/187 Preceptor Syllabus*. Fresno, CA: CSUF School Nurse Services Credential Program. (Sent in Admission Packet)
- California Dept. of Education. (2003). *Health framework for California public schools*. Sacramento, CA: Author. (Approx. cost: \$20.00) Free online at www.CDE.ca.gov
- California Department of Education (2007). *Standards for scoliosis screening in California schools*. Sacramento, CA: Author. Free download from website at <http://www.cde.ca.gov/ls/he/hn/documents/scoliosissreening.pdf>
- California Department of Education (2006). *A Guide for vision testing in California public schools*. Sacramento, CA: Author. (Free download from website at <http://www.cde.ca.gov/re/pn/fd/documents/finalvisionreport.pdf>)
- California Department of Health Services, Immunization Branch. (2003). *California immunization handbook*. Berkeley, CA: Author. (Free copy on Orientation Day)
- California School Nurses Organization (2007). *Communicable disease flip chart*. Sacramento, CA: Author. (CSNO cost \$11.00 members/\$16.50 non-members)
- California School Nurses Organization (2007). *First Aid procedures flip chart*. Sacramento, CA: Author. (CSNO cost \$11.00 members/\$16.50 non-members or check for it at school sites.)
- California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I (CD version only) (CSNO cost \$25.00 members/\$30.00 non-members)
- California School Nurses Organization (2007). *Role of the school nurse and health clerk*. Sacramento, CA: Author. (CSNO cost \$13.20 members/\$18.70 non-members)

- National Association of School Nurses. (1998). *Guidelines for school nursing documentation: Standards, issues, and models*. Scarborough, ME: Author. (NASN, \$22.00 members/\$33.00 non-members)
- National Association of School Nurses. (2002). *Care of students with special needs in Schools*. Scarborough, ME: Author. (NASN, \$25.00 members/\$35.00 non-member.)
- National Association of School Nurses. (2005). *Delegation of care*. Scarborough, ME: Author. (NASN cost \$15.00 members/\$20.00 non-members)
- National Association of School Nurses. (2004). *Using nursing languages in school nursing practice*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)
- National Association of School Nurses. (2005). *Scope and standards of professional school nursing practice*. Scarborough, ME: Author. (NASN, \$15.00 members/non-members, \$20.00)

NURS 186, RECOMMENDED TEXTS AND PUBLICATIONS

(Optional only, NOT required)

- Boynton, Rose W., Stephens, G. R., Pulcini, J. (2009). *Manual of ambulatory pediatrics*. Philadelphia, PA: Lippincott, Williams & Wilkins. (CSUF Kennel Bookstore or online, approx. \$60.00)
- California School Nurses Organization (2000). *SARB and the school nurse*. Sacramento, CA: Author.
- John Hopkins Hospital, Custer, J., Rau, R., Lee, C.K. (2008). *Harret lane handbook* (18th Ed.). Mosby/Saunders. Or MUST have a current pharmacology handbook of choice.

Lewis, K. D. & Bear, B. J. (2008). *Manual of school health* (2nd ed.). NY: Saunders.

(CSNO, \$47.00 members/\$52.00 non-members)

National Association of School Nurses. (2007). *Disaster preparedness: Guidelines for school nurses*. Scarborough, ME: Author. (NASN cost \$25.00 members/\$35.00 non-members)

National Association of School Nurses. (2007/2008) *NANDA's Nursing Diagnoses: Definition and classification*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)

Note: All CSNO and NASN publications are excellent library/resource materials. Complete lists of those publications can be found at their respective websites.

Order Information:

- Required textbooks for fall 2010 go on sale through the CSUF Kennel Book Store on July 26, 2010. Books can be ordered online at <http://www.kennelbookstore.com>, however, there is a shipping charge. Students coming to Orientation will have the opportunity to purchase books in the morning that same day from the bookstore.

Publications from other organizations / sources will need to be ordered online or by mail.

- California School Nurses Organization publications go to www.csno.org
- National Association of School Nurses go to www.nasn.org
- California Department of Education Bureau of Publications Sales Unit, P.O. Box 271, Sacramento, Ca 95802-0271, or by calling (916) 445-1260 or 1-800-995-4099 or FAX 916-323-8023.)
- California Dept. of Health Services, Publication Sales, 2151 Berkeley Way, Berkeley, CA 94704)

GRADING CRITERIA

A = 90 – 100% B = 80 – 89% C = 70 – 79% D = 60 – 69% F = 59% and below.

TEACHING STRATEGIES

With guidance and counseling from CSUF faculty, students gain knowledge in the clinical setting under the direct supervision of a qualified school nurse preceptor approved by faculty. Students are required to keep a journal of their clinical activities. The practicum includes a

rounded experience in elementary school nursing, i.e., health teaching, counseling, case management of students with acute and chronic health problems, assisting medically fragile; collaborating with other school professionals as a member of the education team, participating in the IEP process; visiting community agencies; attending school nurse in-services and conferences; researching journal articles, websites, district policies, CA codes, federal laws, and with application of Standards of School Nursing Practice as basis for practice; and participation in class discussion on Blackboard discussion board relevant to clinical issues and experiences.

ASSIGNMENT/PARTICIPATION POINT VALUE

Assignments	Points
Student goals and learning objectives	5
Clinical journaling	16
Journal questions	14
3-Way conference/communication between student, preceptor and instructor	05
Participation in Blackboard class discussions	12
Student selected assignment - health teach or policy/procedure paper	10
Cross cultural/Special Ed Case Study	16
Final self-narrative evaluation of clinical experience	2
Preceptor evaluation of student performance in clinical practice	20
(If applicable, Experienced Nurse Project = 5 pts. of the 20 Preceptor Evaluation pts.)	
Total	100

Note: See assignment guidelines for details.

READING REQUIREMENTS

Self-directed readings based on each student's needs according to course objectives and course assignments. Readings will include current journal articles relevant to school nursing and other readings appropriate to the needs of the student, as well as presentations and information posted on Blackboard Discussion Board by classmates and instructors throughout the semester.

COMMUNICATION

Email will primarily be used for on-going communication between the student, preceptor, and clinical instructor throughout the semester. Students are strongly encouraged to communicate with their clinical instructor through use of "Ask the Instructor" in Blackboard. Instructors will be checking this forum weekdays, Monday through Friday. Students may also communicate with their clinical instructor by telephone and through visits to the CSUF office during scheduled appointments. (See page 3 of syllabus for contact information.)

HOURS OF PRACTICUM EXPERIENCE

There are a Total of 135 Hours in the Practicum Experience.

Students will spend fifteen of those hours in class related communication as follows:

- Ten (10) hours participating in discussion on Blackboard Discussion Board. (Approximately 40 minutes per week throughout the semester.)
- Three (3) hours networking with area support group members via email, Blackboard, small group forums/chat rooms, and area meetings and luncheons, the purpose being to lend support, problem solve, and plan relevant fieldtrips to agencies.
- Two (2) hours spent in communicating and conferencing with clinical instructor by email, Blackboard forum, telephone, and office visits. This allotted time also includes one mandatory student-preceptor-instructor 3-way conference during the semester.
- The remaining 120 hours are broken down in clinical experience in the field.

Clinical Experience for Students Employed as School Nurses.

Of the 120 hours remaining:

- Students who are currently employed as school nurses will be credited with 40 hours for their school nursing experience.
- Students will be responsible for completing an additional 80 hours of clinical practice under the direct supervision of a qualified preceptor *away from their own worksite*. That clinical practice may be in the district in which the student is employed.
- Of those 80 hours, with preceptor approval, students should try to attend 3 school nurse meetings, conferences, workshops related to school nursing (up to 12 hours). These should not be routine staff meetings in the course of their employment. These meeting may be district, local, or CSNO meetings.
- Additionally, students *must* spend between 6 and 8 hours in activities involving the community that are relevant to elementary school nursing, i.e., visits to health referral agencies, participation in community health fairs, migrant clinics, PTA meetings, other. These activities must be with preceptor pre-approval.
- The remaining 60 hours *must be spent at school sites working under the direct supervision of the preceptor or his/her qualified school nurse designee*.
(Note the exception to the rule for experienced school nurses noted below.)

Experienced School Nurse Project:

- School nurses who have had two or more full years of school nursing experience at the elementary level may choose to use up to 20 of those remaining 60 clinical hours working on a special project. (See details on p. 12)

Expanded Leadership Role:

- Students may earn up to a maximum of ten (10) hours for actively pursuing a leadership role related to school nursing. To do this, students must petition their clinical instructor for an appropriate number of hours. Note: NOT an option for students who choose to complete an Experienced School Nurse Project. (See details p. 12)

Clinical Experience for Students who are NOT currently practicing School Nursing:

- Students *must* complete the full 120 hours under direct supervision of a preceptor.
- Of those 120 hours, students *must* attend a minimum of 3 school nurse meetings, conferences, workshops related to school nursing (up to 12 hours), with preceptor pre-approval. These may be district, local, or CSNO meetings.

- Additionally, students must spend between 6 and 8 hours in activities involving the community that are relevant to elementary school nursing, i.e., visits to health referral agencies, participation in community health fairs, migrant clinics, PTA meetings, other. These activities must be with preceptor pre-approval.
- The remaining 100 hours *must* be spent at school sites *working under the direct supervision of a qualified preceptor or his/her qualified school nurse designee.*

Nurses Currently Employed as Public Health Nurses

- Nurses who are employed by a health department or other community agency will be given 20 hours of credit toward their clinical practice.

STUDENT GOALS AND LEARNING OBJECTIVES

Student Goals and Learning Objectives: (Point Value, 5)

Goals and objectives **MUST** be developed with input from the student's preceptor prior to or during the first week of the student's clinical experience. The opportunity for the student to create their own goals and objectives is a chance for students to personalize their learning experience. The aim should be a rounded experience in elementary school nursing. Student Goals and Learning Objectives must reflect areas where experience is needed or, for experienced school nurse student, areas of special interest within course guidelines. It is expected that goals and objectives will be accomplished before the end of the semester.

1. *Students are to have three (3) Student Goals with a suggested five (5) Learning Objectives and five (5) Learning Activities for each goal. Students also need to indicate how each of these goals will be measured in order to determine learning outcomes.*
- If the student has little or no previous experience in elementary school nursing, he/she will want to spend time getting a well rounded experience (*See Suggested Guidelines for Time Spent in Clinical Practice*, page 18 of syllabus) and may want to broaden his/her insight into the school aged population by spending time observing in a regular and/or special ed. classroom, talking to teachers/ principals/school psychologist; or gaining greater insight into health services by reading through policies and procedure manuals, or learning about coordinated school health programs and other aspects of the school nurse role.
 - If the student has already had experience in regular elementary school nursing, that student may want to gain some experience in specific areas of interest, i.e., programs related to special education such as working with the medically fragile or with children with behavioral issues; or in other programs such as preschool or early childhood; spending time in a specialty clinic(s) relevant to elementary school aged children, or in a school based clinic. Experienced school nurse students should think globally and develop goals that are challenging and/or go beyond the basic school nurse role.

Example of a goal with learning objectives, learning activities, and how to measure:

Goal 1	To gain insight into care and medical management of various health conditions and health problems seen among children at the elementary level.	
	Learning Objective	Learning Activities
	A. Describe care and medical management of three chronic health conditions associated with school-age children.	• Interview preceptor regarding types of chronic health problems seen in school in elementary school age children. • Interview my preceptor about methods of managing children with chronic health conditions in the school setting. • Assist preceptor in case management of 5 children who have chronic health conditions over a six week period.
	B. Describe care and medical management of five types of acute health conditions and/or injuries associated with school-age children.	• Interview preceptor regarding types of acute health conditions and injuries seen in school in elementary school age children. • Interview my preceptor about methods of managing children with acute health conditions and injuries in the school setting. • Assist preceptor in assessing and caring for 20 children with acute health complaints coming into health office over a six week period.
	C. Describe three common conditions and/or communicable diseases that require exclusion from school to prevent spread among the school population and the management of each.	• Interview preceptor regarding types of communicable diseases or conditions observed among elementary school age children. • Interview my preceptor about methods of managing children with communicable conditions and prevention of spread to others. • Assist preceptor in screening, identifying and referring 10 children with possible communicable conditions over six week period.
How will this goal be measured to determine learning outcome: Preceptor evaluation of skill and self evaluation.		

Note: Students who have NOT had previous experience at the elementary level in their SN practice are free to modify this example. **School nurses with two or more years of school nursing experience at the elementary level are expected to be more creative in developing their Student Goals and Learning Objectives.**

3. Timeline for Developing Student Goals and Learning Objectives:

Student Goals and Learning Objectives should be developed in, or before, the third semester week once the student has begun clinical practice. A rough draft of goals and objectives is to be emailed to the student's clinical instructor for review. The clinical instructor will notify the

student if goals and objectives are satisfactory, or if changes are necessary. Once approved, points will be posted in the student's online grade book. The student is to send a finalized copy of Student Goals and Learning Objectives in Blackboard with other Module I work when due.

EXPERIENCED SCHOOL NURSE PROJECT

(School Nurses with 2 or more years of elementary school nursing experience)

A Project would take the place of one of the three student goals. As previously indicated the project must be approved by the student's preceptor and based upon a recognized need. This may take place at the student's own school or that of the student's preceptor. It must be something that would benefit other school nurses and/or the school district in general.

Examples of projects: Developing a PowerPoint presentation that can be used as a school board presentation, for in-service of staff, presentation to parent group; getting involved in a research project or a survey, i.e., gathering data to determine the need for a program; involvement in grant writing project to fund a program/purchase equipment, working on a segment of a coordinated school health program with another department, i.e., food services/administration to get vending machines removed from campus, or a program related to school safety, bullying awareness and prevention, exercise, nutrition, dental hygiene; developing a resource binder of relevant community agencies; planning and carrying out a health fair on campus; etc.

Completion of *Experienced School Nurse Practicum Project Proposal*:

1. Project proposal must include a statement justifying the project, timelines for its completion within the semester, and the preceptor's initials signifying approval. A copy of completed form is to be sent to clinical instructor with other Module I work.
2. For Module II and Module III, project progress notes must be written up separately from other journaling and include details regarding time spent on project.
3. On completion of project, student's preceptor is to sign off on the project on the original form. The signed completed project proposal, along with an electronic/hard copy of the project is to be sent to the student's clinical instructor.

Note: Experienced School Nurse Project is worth up to 20 hours and 25% (5 pts.) of the value of the Preceptor Evaluation of Student's Practicum Experience.

EXPANDED LEADERSHIP ROLE

(Open to all students except those choosing Experienced School Nurse Project)

Students may earn up to a maximum of ten (10) hours for actively pursuing a leadership role related to school nursing. For example: Presentation of school nurse issue/or student health concern to a school board, community group, parent group, school staff; a leadership role in a professional or community organization; chairing a school site committee; leadership role in

health education; developing a school site plan for disaster/emergency health management; a fund raising activity related to children's health, participation in legislative advocacy relevant to children's health or school nursing. This leadership role may be one that comes up during the semester. Students must petition their clinical instructor for a relevant number of hours. This is NOT an option for students who choose to complete an Experienced School Nurse Project.

MID-TERM PROGRESS CHECKPOINT

1. *Mid-Term Evaluation of Student's Goals and Learning Objective.*

Between the 7th and 8th week of the semester, students are to sit down with their preceptor to discuss progress toward achieving goals and objectives. At this time, if necessary, changes may be made in goals, learning objectives and/or learning activities to benefit the student's learning experience. Changes could relate a developed interest in another area, need to change/drop a learning activity related to lack of opportunity or time issue.

2. *Mid-Term Written Self Evaluation.*

In preparation for a mandatory 3-way conference between clinical instructor, preceptor, and self, students are advised to write a brief *Mid-Term Self Evaluation* which may be incorporated into the student's clinical journaling. The purpose is for the student to reflect on progress made and plans for further activities to meet goals and objectives.

3. *Mid Semester Mandatory Three-Way Conference:* (Point value, 5)

Between the 7th and 10th week of the semester, students are to arrange a 3-way conference between themselves, their preceptor, and clinical instructor. The conference should take place when the student and preceptor are together at a school site. Students are to contact their clinical instructor to share contact information, i.e., time, place, numbers. Students outside the Fresno area will participate in a 3-way telephone conference. Students in the Fresno area are to arrange a time for a site visit by their clinical instructor unless other plans have been made.

FINAL NARRATIVE SELF EVALUATION

Final Narrative Self Evaluation: (Point value, 2)

Students are to complete a *Final Narrative Self Evaluation* upon completing their clinical experience. This is to be a one-page summary of their clinical experience. It should include the following:

2. Attainment of goals and objectives
3. Areas of major learning and insight
4. Strengths, new skills, improvements
5. Changes, what you would have done differently
6. Comments regarding practicum experience

FINAL DOCUMENTATION / EVALUATION
(See Preceptor Syllabus)

The student's preceptor will use the Preceptor Checklist and other evaluation tools in the Preceptor Syllabus as a guide to assisting the student in structuring clinical experiences in the elementary setting. These same tools should be reviewed at mid-term before the required 3-way conference between student, preceptor, and clinical instructor. Student and preceptor are to review these tools again at the end of the student's clinical experience. The student's preceptor will then complete a written evaluation of student's performance. Throughout the semester, students are to communicate frequently with their preceptor regarding progress made with Student Goals and Learning Objectives. Students are also expected to keep their clinical instructor informed throughout the semester through clinical journaling. At the end of the semester students are to meet with their preceptor to go over the Preceptor Checklist and other evaluation tools again to be sure that all aspects of clinical experience have been addressed.

Note: Both the N186 Preceptor Checklist, Preceptor Evaluation of Student Professional Dispositions and Preceptor Evaluation of Student Competencies must be received by the student's clinical instructor by the end of the semester in order for the student to receive a final grade. The Preceptor Evaluation of Clinical Course should also be sent at this time.

CLINICAL JOURNAL GUIDELINES

Journaling begins with first meeting with preceptor to planning practicum experience: (Points, 16)

A. The purpose of weekly journaling is three-fold:

1. A method of keeping track of your hours and activities
2. It provides an ongoing communication with the clinical instructor
3. A method for sharing accomplishments, insights, and experiences.

B. **Journal 1-2 pages using APA format for each 6-8 hour timeframe (equivalent to 1 day).**

1. Within each 6-8 hour period describe 2 significant clinical learning experiences you gained in that given period of time. These experiences could take place during a session with your preceptor, attendance at a conference or SN workshop, participation in a community activity, a meeting, or while visiting a community agency or program.
2. For each of these three experiences **succinctly** describe the following:
 - a. What you did (i.e., steps in the Nursing Process, including personal encounters);
 - b. Information sources (i.e., preceptor, website, article, policy, code, position statement);
 - c. What you learned (i.e., a process, skill, method, validation of own practice);
 - d. How you plan to use the insight in your own SN practice.

C. **Example of Journaling:**

Student Name ****
N186, Module I

Documentation of Clinical Time:

Semester Week	Date of Clinical Activity	Hours of Practice	Remaining Hours
4	Sept. 15	8	72

Summary of Time Spent:

- 4 hours with preceptor assisting with health office traffic and various health issues
- 2 hours spent observing learning disabled children in a special day class
- 2 hours spent at a school nurse in-service on asthma management in the school setting

Journal Narrative: Example of a meaningful learning experience

(Note: Students are to double space journal entries and include a-d noted in B above.)

9/15/09, 8AM-12N, preceptor's health office:

(a) A kindergartner arrived in the health office with a note from the teacher stating that the child was constantly "scratching". Upon my assessment, the child did not have a fever and appeared generally healthy and well nourished. I noted what appeared to be scratch marks on the child's

abdomen, forearms, and between the fingers. I suspected scabies. I shared my suspicion with my preceptor. I then called the child's mother and requested that she pick up the child to be seen by her health advisor. I stressed that I would need written clearance from the health advisor before the child could return to school. I further suggested that if other family members were scratching, they also needed to be seen by their health advisor. My preceptor stated that if this is scabies, the mother will be given instructions regarding steps to prevent spread at home, and parents of the other children in the classroom will be notified about possible exposure. As a precautionary step, she suggested we contacted the custodian and requested classroom table surfaces, common toys, and rugs on the floor where the children sat, needed sanitizing that day.

(b) Following my preceptors suggestion, I reviewed the Communicable Disease Manual and the district CD exclusion policy for further clarification.

(c) I appreciated this learning experience as I had not dealt with possible scabies in a classroom before, especially in kindergarten where the likelihood of spread is very real. I was impressed with my preceptor's practical, yet precautionary approach to the situation.

(d) I plan to use this type of approach in my own SN practice. I will review the Policy and Procedure Manual in my district in the area of CD control and exclusion

JOURNAL QUESTIONS SPECIFIC TO OWN SCHOOL NURSE PRACTICE

Journal Questions: (Point value, 14)

Students are to answer the questions in one to two pages (APA format) and turn in on a separate sheet of paper along with journal entries on scheduled due dates. Journal questions should be restated prior to response (Single spaced/10 font).

Module I, Weeks1-4

1. Locate the job description for the school nurse (scan and include a copy) in your district. Does the job description reflect your expectations? Is it relevant to the school nurse role for today? Are there things you would like to change? (See also Selekman, pp. 125,1076-1080)
2. Discuss with your preceptor his/her method for organizing and planning the school year. Compare/contrast with your own organizational methods and time management. Are there ideas/methods your preceptor uses that you could incorporate in your own SN practice? What did you learn about various annual reports that must be submitted to the State, county, district, others? (**See also Selekman text and NURS 184 Documents section**)

Module II, Weeks 5-8

3. Talk with your school principal about his/her perceptions of the school nurse role. Briefly describe his/her views and contrast with your own perceptions. Take the opportunity to expand his/her understanding of your role and ask for suggestions on how you might better serve the school community. Talk to others, i.e., office staff, teachers, and children about their perception of your role. With this new found insight, what are some steps you will consider taking to promote a realistic view of the school nurse role?
4. Summarize the findings of a current **research** article relevant to elementary school nursing practice. A research article has data, statistics etc. Describe the type of research that was done, findings, and value to your school nursing practice. Comment on how you could utilize these findings in a particular circumstance in your practice. The summary should be titled with source cited, 1-2 pages in length, using APA format. Highlights of summary are to be shared on Bb Discussion Board in forum provided.

Module III, Weeks 9-12

5. Apply a nursing theory (e.g., Neuman, Orem) to a situation you have encountered recently in your SN practice. Briefly describe the situation and discuss how you could apply the theory. How can the utilization of theories help you deliver better nursing care in the school setting? (**For theories, see Selekmán text, Ch. 2 or go online**)
6. Discuss the function of a SARB (School Attendance Review Board) with your preceptor. See also CA Ed. Code section 48320-48325 at www.leginfo.ca.gov. Review your district's policy on attendance and referral. What is involved in the process? What steps are taken to improve a student's attendance in your district before a SARB meeting referral is necessary? Discuss school nurse involvement.
Note: Time spent at a SARB meeting counts toward a community outreach practicum activity.

Module IV, Weeks 13-15

7. Go to your district website or interview a knowledgeable person regarding the various sources of revenue that come into your school district (federal, state, county, grants) and how it must be spent, i.e. categorical funds. What percentage of the total budget goes to district health services? Talk to you immediate supervisor, or preceptor, about how that money will have to be used. How much money is allotted to your school(s) for first aid and other supplies? (**For added insight, see Selekmán text, Ch. 44**)

BLACKBOARD DISCUSSION BOARD PARTICIPATION

A total of Twelve Semester Hours: (Point value, 12)

In N186, students should spend approximately 45 minutes per week participating in discussion on the Blackboard Discussion Board. Note: A forum, “Ask the Instructor,” will be available for students to ask questions of instructor.

Guidelines for Participation:

1. The time spent on the discussion board may be broken up to suit the student’s availability of time, though contributions should ideally take place over a matter of several days to allow for meaningful discussion and input from others.
2. Contributions to discussion should be meaningful to fellow students and relevant to school nursing. Students should feel free to enjoy the networking.
3. *Week One*, students are free to get acquainted with the Blackboard program.
4. *Week Two*, a forum will be opened so students can begin getting better acquainted with classmates, i.e. about you, your job, caseloads, interests, as well as responding to input from others.
5. *Week Three*, the instructor will begin opening bi-weekly forums. At this point student will be expected to contribute to weekly discussions based on instructor prompts and contributions by fellow classmates. Students will also be free to bring up topics of interest of their own, such as clinical situations/problems, share information on workshops, job opportunities, lesson plans, and other information of interest to others.
6. Guidelines for discussion participation beginning with 3rd week:
Rule of thumb, 3 paragraphs per week spread over several topic areas.
Note: A paragraph can be described as one opening sentence, at 3 supporting sentences, and a closing sentence. Discussions will be monitored by clinical instructor.

CLINICAL HOURS BREAKDOWN FOR STUDENTS NEW TO SCHOOL NURSING

Clinical Activity Chart: The following guidelines may be helpful in planning student practicum experience for nurses who have had limited exposure to school nursing at the elementary level.

ACTIVITY	80 HRS.	120 HRS.
Health office management: Organizational skills, planning, report writing, student visits to health office.	6–7 hrs.	14-16 hrs.
Screening and referral (hearing, vision, scoliosis, dental, other)	5–6 hrs.	8-10 hrs.
Immunizations (paperwork, clinics, follow-up), Communicable disease control and follow-up.	4–6 hrs.	7-10 hrs.
Medications, documentation and confidentiality	4–5 hrs.	6-8 hrs.
Home visits, absentees, parents conferences	3–4 hrs.	4-5 hrs.
Nursing process, case management of chronic conditions, health care plans, action care plans	4–5 hrs.	8-10 hrs.
Other campus and community programs, i.e., preschool, infant stimulation, classroom visits	5–7 hrs.	5-7 hrs.
Health teaching (classroom, groups, health fairs)	4-5 hrs.	5-6 hrs.
Faculty meetings, school site committee meetings, parent meetings, SARB (Student Attendance Review Board) meetings	2–3 hrs.	4-5 hrs.
Health assessment, health histories, SST, 504, and IEP write-ups	6–7 hrs.	8-9 hrs.
Interdisciplinary collaboration SST (Student Study Team meetings), 504, and IEP (Individual Education Program meetings)	3–5 hrs.	8-10 hrs.
Special Ed. Specialized physical health care procedures, delegation of care, legal and moral issues	4–6 hrs.	7-9 hrs.

With clearance from their preceptors, students should make an effort to attend up to 3 school nurse meetings during the semester (district, county, and/or CSNO), not to exceed a total of 12 clinical hours. Students MUST spend between 6 and 8 hours out in the community visiting health referral agencies and/or involved in activities related to school nursing with interaction with community participants, i.e., health fairs, SARB meetings, council meeting, other. The remaining time must be spent at school sites working/ observing/participating in activities under the supervision of the student's preceptor or qualified preceptor designee.

WRITTEN ASSIGNMENTS

Student Selected Assignment

(Point value, 10)

Students are to complete **EITHER** a Policy/Procedure Paper **or** a Health Teaching Plan.

Policy/Procedure Paper

1. With guidance from student's preceptor or supervisor, evaluate the district's policies and/or procedures related to school health (e.g., communicable disease, emergency care or First Aid, medication at school, safety/environmental health, wellness promotion.)
2. Choose a policy/procedure to review in depth that appears to have an area of need, i.e., revision or change. Perhaps, there is a new policy/procedure that should be developed.
3. Research the medical, legal, i.e. codes, other; ethical; standards of nursing practice; nursing implications that may relate to the policy/procedure.
4. Discuss findings with preceptor and, if in the student's own school district, also discuss with supervisor.
5. Write a draft, or revision of the policy/procedure to share it with preceptor/supervisor.
6. Write other necessary documents (e.g., memos with recommendations, district forms, letters) to facilitate implementation of the policy/procedure with assistance from your preceptor or supervisor. Example: Head lice policy could include letters to parents, teachers, forms for re-entry to school, etc.
7. With approval from preceptor and/or supervisor, develop a plan of action for Implementation, include a possible timeline and list steps involved.
8. If this involves a new or revised district policy students need to discuss with this with your preceptor and/or supervisor regarding the necessary steps involved in presenting your recommendations to the district Board of Education for consideration for adoption.
9. Write a 4 page paper using APA format:
 - Explain why you selected that particular policy or procedure.
 - Write justification for change/new policy or procedure based on research and other considerations listed in #3.
 - Outline of the process, including steps you will take to present recommendations to supervisor and Board of Education if appropriate.
 - Include the following documentation with paper:
 - Copy of outdated document with lined out and/or indicated changes
 - Proposed document with recommended changes
 - Copies of letters, memos, and/or other documentation you wrote to others

in presenting your argument and/or in the process of facilitation/ implementation of policy/ procedure.

10. On Blackboard Discussion Board, share a summary of your proposed policy/procedure and steps you took to implement changes and benefit to district.
11. Send entire assignment electronically with other Module III work on dates indicated.

Health Teaching Plan and Classroom Presentation

1. Decide on a lesson to be taught in the classroom at a particular grade level.
2. Review the *Health Framework for California Public Schools* (2003) put out by the CA Dept. of Education, to gain insight into grade level expectations for your targeted population.
3. Review sections of the CA Education Code that may apply, i.e., CEC 49426, CEC 51881, CEC 51210, CEC 51820, CEC 51890, CEC 51913, CEC 51550
4. Review teaching/learning theories. Website, <http://tip.psychology.org/theories.html>
See also N186 Documents Section in Blackboard.
5. Write a 2-page paper using APA format addressing the following:
 - Statement of the problem and justification for teaching
 - Justification should be based on review of 2 sources of literature and/or journal research, summarize each source in 1-2 quality paragraphs. Include reference to Ed. Code and district policy as appropriate.
 - Grade level expectations/readiness to learn (based on CA Health Framework)
 - Include one sound teaching/learning theory relevant to target group.
7. Develop a teaching outline using the outline form below.
8. Present the lesson (preferably at a time when your preceptor can be present).
 - Incorporate learner theory based activities (small group, individual expression, worksheets to take home, etc.).
 - Include an appropriate method of learner evaluation followed by outcomes.
 - Note: Actual teaching time counts toward clinical practice.
9. Write a brief Self-Evaluation (1 page or less).
 - Discuss how you think it went, if you held their attention, what unexpected problems you encountered, what you would change, not repeat, or add.
 - Include feedback from your preceptor / learners.
10. Include a list of resources for teaching materials related to teaching plan (websites, organizations, service clubs, companies).
11. Include copies handouts or description of visual aids, activities, products, etc.
12. Include learner evaluation, tool/documentation.
13. Share your teaching outline on Blackboard and include resources for classmates.
14. Send complete assignment electronically with other module work by due date.

Teaching Plan Outline

Date of Implementation

Topic

Group

Main goal of lesson

Evidence of learner readiness, why need / want to know this information.

Behavioral objectives for learners (use action verbs)

Teaching methods (theory-based, lesson activities)

Setting (Choice of room arrangement—circle, sitting on floor, rows of chairs)

Materials needed

Content outline (complete - including introduction, body, and summary)

Method of learner evaluation

Final outcome (Your impressions)

Cross Cultural / Special Ed. Case Study

(Point value, 16)

The purpose of this assignment is for the student to gain a broader perspective and more in depth understanding of the SST (Student Study Team) / IEP (Individual Education Plan) process and the role of the school nurse as a participating member of the assessment team.

Note: Begin early in the semester by speaking with your preceptor, the school psychologist, resource teacher, classroom teachers in an effort to find a suitable child for your case study.

Note: Subject of case study may be a child in the school nurse student's own school nursing practice. *Home visits, assessment time, meetings time counts toward clinical hours.*

1. Subject of case study should be a child who:
 - a. Is preschool or elementary school age from a different cultural background other than your own;
 - b. Needs a health assessment and health history done by the school nurse;
 - c. Referred to a SST (Student Study Team) with likelihood for the development of a 504 Plan or referral on for an IEP (Individual Education Plan) assessment;

- d. Or who has already been referred to an IEP (Individual Education Plan) for assessment with possibility of placement in a special education program.
- 2. Initial steps:
 - e. Review the student's health record and emergency card;
 - f. Observe child's general health status, check vision and hearing;
 - g. Interview other relevant school site personnel – child's teacher, teacher's aide, bus driver, psychologist, other members of the assessment team;
 - h. Observe the child in the classroom, on the playground, and/or in the lunchroom.
- 3. Health and Development History, Cultural interview:
 - i. Make a home visit, in the company of another member of the education team, or home liaison, to obtain a health and developmental history; to discuss with the parent/guardian any current health concerns and general cultural behaviors and any cultural issues that may contribute to the child's inability to learn; to observe general living conditions that may contribute to the child's learning issues; to obtain written permission from the parent/guardian to obtain/share medical information with the child's physician and appropriate others "on a need to know basis." A home visit is also an opportunity for a member of the IEP team to obtain a parent signature for permission to do an assessment (this includes the health assessment).
 - j. **Note: The importance of a home visit cannot be overstated**, though students are not asked to make a home visit alone. If a home visit is out of the question, ask the parent to come to the school site to be interviewed. A health history should NOT be obtained over the phone.
- 4. In-depth Health Assessment:
 - k. Be sure parent permission for assessment has been obtained before proceeding. Use the Nursing Process to determine a nursing diagnosis and to design appropriate interventions. A thorough health assessment must include general health status, vision, hearing, dental, dietary habits/nutritional status. If the school nurse student has received training in the use of neurological screening such as a QNST (Quick Neurological Screening) or DDST (Denver Developmental Screening Test), this should also be included in the assessment. An IHP (Individual Healthcare Plans and/or referral/follow-up on any health problems and nursing interventions must also be included.)
- 5. Use of Theories in assessment:
 - d. Use Neuman's Model (See Bb Document Section). Incorporate a relevant cultural theory/model, i.e., Leininger's Transcultural (See Selekman text, Ch. 2)
- 6. Use of Research:
 - e. Research two (2) current journal articles and one (1) website source relevant to your case study. Two sources should be specific to health related issues, one

specific to cultural differences related to background of subject of case study.

7. SST/IEP Team, school nurse responsibilities:
 - f. Complete appropriate reports/paperwork and submit to SST or IEP team facilitator.
 - g. Share copies of these reports/paperwork with preceptor
 - h. Attend SST/IEP meeting and share findings verbally with team members and family; obtain feedback. Observe process and team/family interaction.
8. Follow through on recommendations:
 - i. Follow through with team recommendations specific to school nurse role.
 - j. Complete paperwork, i.e., health record, other.

Note: For insight into IEP process and other relevant information, see the following:

- CDE. (1990). *Guidelines and Procedures for Meeting the Specialized Physical Health Care Needs of Pupils* (Green Book). Part I: administrative concerns. (See CSUF Madden Library, selected readings for N184 / Week15.)
- Stanislaus COE Health Services Manual, Ch 14. N186 Documents section Blackboard.
- Selekman, Janice. (2006). *School nursing: A comprehensive text*. (Ch. 9).
- Lewis and Bear. (2002), *Manual of School Health* (Ch. 9).
- School district policy and procedure manual.

Guidelines for writing up Cultural Differences/Special Ed. Case Study:

The database for your case study should be in-depth and complete, but succinct. It is quality of information shared, not quantity that is important. The following areas are intended as a guide. You may skip over items that do not apply. The case study is to be written in APA format, with a title page and each section should have an appropriate heading. There is a suggested page length for the different areas that will vary with each case study.

1. Begin with an opening paragraph relating reasons why the subject of your case study was referred to either the SST or IEP team for evaluation/assessment.
2. Discuss findings based on observations/interviews relevant to no. 2 noted above. **(1p.)**
3. Discuss observations/information obtained from parent/guardian during home visit. **(2p.)**
 - a. *Family/Cultural Assessment*: Cultural background/lineage; family patterns; interaction within the family and with community, i.e., coping skills/stress management/discipline; social support; education/socioeconomic level; cultural patterns/beliefs with regard to roles, health/illness, self-care, dietary habits. Relate cultural family issues to research related to general aspects of that particular cultural background and incorporate a relevant cultural theory.
 - b. *Health and Developmental History*: Pregnancy history; siblings and any health issues; child's developmental history; family history of illness/LH/ADD; child's medical history (current meds, past illness / accidents); and social/interactive patterns (play, friends, classroom/home behavior); family perception of problem,

previous interventions, and successes/failures.

4. Discuss findings of other health professionals and school site team members: **(1p.)**
 - a. Reports from MD, speech therapist, OT, PT, testing by school psychologist on patterns of school performance, etc;
 - b. Briefly summarize each report in one paragraph or less.
5. Discuss in depth health assessment/Nursing Process: **(2p.)**
 - a. Address assessment indicators in no. 5 above;
 - b. Incorporate research findings relevant to medical diagnosis;
 - c. *Determine a Nursing Diagnosis* based on assessment data;
 - d. *Develop a Nursing Plan*, nursing actions/interventions to share with team at meeting, IHP, etc.
 - e. *Implementation/Evaluation*, indicate how plan will be implemented and evaluated.
 - f. Incorporate *Neuman's Systems Model* related to nursing interventions;
 - g. Use standardized language related to nursing diagnosis in write up (See NASN, *Using nursing languages in school nursing practice*);
 - h. Scan or summarize school nurse written report for SST or IEP team.
6. Briefly describe the IEP legal process and timelines for signatures and meetings. **(0.5p.)**
7. Describe the SST / IEP experience, the meeting, your participation: **(1p.)**
 - a. Your role and thoughts regarding the process;
 - b. What you did well and/or areas of weakness;
 - c. How were you perceived as a member of the team;
 - d. Family member's role and comfort with process, response to you.
8. Share key points about your case study with classmates on Blackboard Discussion Board in a forum that will be provided. **(0.5p.)**

Note: Be careful to blot out family names, child's name, those of team members on all paperwork related to this case study to ensure anonymity. Original documentation may be requested by your clinical instructor.

INSTRUCTIONS FOR SENDING COMPLETED ASSIGNMENTS

A. Completed module work is due on Monday following the last Friday of each module.

Module No.	Begins Monday	Ends Friday	Send Date	Grace Period to	Late Work Deduction
I	8/23/10	9/17/10	9/20/10	9/24/10 11:59 p.m.	9/25/10 10% per wk
II	9/20/10	10/15/10	10/18/10	10/22/10 11:59 p.m.	10/23/10 10% per wk
10/04/10 11/05/10	Window of time allotted for mid-term self-evaluation and 3-way conference between clinical instructor, preceptor, and student.				
11/12/10	Selected Assignment due on Blackboard Discussion Board				
III	10/18/10	11/12/10	11/15/10	11/19/10 11:59 p.m.	11/20/10 10% per wk
11/29/10	Cross-Cultural Special Ed Case Study due (To be sent electronically)				
IV	11/15/10	12/10/10	12/13/10	12/17/10 11:59 p.m.	12/18/10 10% per day

B. Send Assignment Work:

- Journaling and other assignment work is to be sent through Blackboard ‘Assignment Drop Off’ located in the NURS 186 ‘Assignments’ section. (For directions, see same section).
- All journaling, journal questions, and other assignment work due at the same time must be sent in ONE complete document, unless otherwise indicated. The document should have a title page indicating module number and student’s name. Journal questions must be restated prior to responses. Work within the document must be clearly titled and

sequentially organized. Students should ALWAYS KEEP A COPY of work sent!

- Clinical instructor will post comments and points in the student's online grade book in Blackboard (Allow 14 days).
- If unavoidable circumstances that prevent a student from sending work on time, that student MUST notify the instructor before the assignment due date!

QUALITY OF WRITTEN WORK:

Careful proof reading is essential for all paperwork! A paper with more than **six** spelling and/or grammatical errors might receive a lower grade, or in extreme cases, a request to rewrite the paper. Among the evaluative criteria employed by instructor are clarity, organization, support for ideas expressed, and grammar. The length of the paper is not as important as above criteria.

NOTE REGARDING FINAL GRADE:

A final grade cannot be assigned without BOTH the written assignments and a satisfactory completion of the following: the *Preceptor checklist*, *Preceptor Evaluation of Student Clinical Competencies*, and *Preceptor Evaluation of Student Professional Dispositions*. Both clinical competence and written work will be judged in assigning the final grade.

GRADING CRITERIA FOR WRITTEN ASSIGNMENTS

1. Student Goals and Learning Objectives

(Total 05 Pts.)

Appropriateness (grade level/age, etc.)	03
Thoroughness / Completeness	02

2. Student Selected Assignment

Students are to select ONE of the following two Assignments to Complete as Directed:

a. Policy / Procedure Paper

(Total 10 Pts.)

Statement of problem (depth, quality, major concerns)	02
Research: validate need/Ed. Code/district policy/standards of nursing practice	02
Steps to change/develop/implement - paper trail/other communications/meetings	04
Evidence of usefulness / value of outcomes to school nurse practice	01
Presentation of information / writing skill / APA format	01

OR

b. Health Teaching Plan and Presentation

(Total 10 Pts.)

Statement of problem / justification for teaching	01
Research (2 articles), teaching/learning theories (1), Ed Code, Health Framework	02.5
Teaching Plan/Outline – group / content / objectives / usefulness / activities	02.5
Presentation - teaching methods / setting / evaluation tools / learner outcome	02
Written Self-Evaluation – strengths, weaknesses, improvements	01
Presentation of information / writing skill / APA format	01

3. Cross Cultural – Special Ed. Case Study

(Total 16 Pts.)

Family cultural assessment and history	02
Health and developmental history, observations, other gathered information	02
Nursing process – assessment, diagnosis, planning, implementation, evaluation	05
Theories/sources(1 Neuman & 1 cultural); literature review (2 health, 1 cultural)	02.5
Write up on IEP (Individual Education Plan) / SST (Student Study Team) mtg.	01.5
Understanding of IEP process and school nurse role	01
Evidence of interdisciplinary collaboration	01
Presentation of information / writing skill / APA format	01

4. Clinical Journal

(Total 16 Pts.)

Thorough/complete/organized journal entries (1-2 pages q 6-8 hours)	08
Evidence of interaction with students/faculty/administrators/preceptor	03
Strengths/ weaknesses/insight gained/application to own practice,	03
Journal organization and neatness	02

5. Journal Questions

(Total 14 Pts.)

7 Journal questions / thoroughness, depth of analysis	14

6. Final Narrative Self Evaluation

Quality of analysis of clinical experience related to personal growth	02

N186 PRECEPTOR CHECKLIST OF SKILLS AND COMPETENCIES (ELEMENTARY)

This is NOT the official preceptor form – It is a student reference guide only.

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the elementary level and explains/demonstrates to the preceptor's satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

School Nurse Competencies 1. Providing Health and Wellness Services (Primary Intervention)									
E1	Organizes and correctly performs screening for the following:								
	Met			Met			Comment if not met		
	Y	N	Date	Y	N	Date	Preceptor initials		
Vision - near/far, color, muscle				Functional vision & hearing					
Hearing, including thresholds				Dental					
Nutritional Assessment				Height, Weight, BMI					
*Competency in each of the above areas must be demonstrated under direct observation the preceptor.									
E2	Correctly carries out the Nursing Process in problem solving matters related to program; and in health assessment of clients, which includes developmental history taking, assessment of growth & development, nutritional status, etc.								
E3	Correctly assesses pupil immunization status upon entry to kindergarten and correctly describes immunization requirements for entry into middle school. Demonstrates/explains accurately reporting requirements/written report.								
E4	Correctly assesses CHDP status at the first grade level, demonstrates understanding for follow-up and report obligation.								
E5	Demonstrates ability to develop an age appropriate lesson plan and carry out a health teach in the classroom in keeping with district policy and Ed Code.								
E6	Correctly identifies relevant community health agencies, services, and programs. Demonstrates leadership ability to assist children and families in accessing appropriate community resources.								
E7	Assists with and/or properly trains and supervises medication administration and permissible tasks and procedures by UAPs (unlicensed assistive personnel).								
E8	Discusses the importance of environmental safety and is able to identify environmental areas that illicit safety concerns. Describes emergency steps taken in the event of a violent incident or an intruder on the school grounds,								
E9	Describes the emergency steps that the school site in the event of a serious personal injury, i.e., instructions, directing emergency equipment, information that needs to accompany injured party(s), role of the school nurse.								
E10	Expresses understanding for Universal Precautions and communicable disease control district policies.								
E11	Expresses insight into the role of the SN as a participant in providing coordinated health services and school health programs to better manage limited resources.								
E12	Demonstrates ability to promote mental health among school age children and school staff through recognition of need, assessment, counseling, health education, and referral to appropriate services.								
E13	Demonstrates ability to promote healthy nutrition and a healthy lifestyle among students and staff through modeling, health promotion and health education.								
E14	Demonstrates the ability to promote oral health among school age children through participating in oral health assessment programs, through health promotion, and health education.								
E15	Describes signs of child abuse/neglect. Explains reporting guidelines, paperwork								

	involved, and names agencies involved.				
E16	Explains the SARB process and takes the appropriate steps to follow up on absenteeism and encourage school attendance.				
E17	Makes appropriate home visit to follow up on absenteeism and/or as member of an IEP team to complete assessment. Demonstrates ability to establish rapport with family.				
E18	Demonstrates sensitivity and understanding with regard to cultural differences among the student population, communicates and counsels effectively with individual students from various cultural backgrounds.				
E19	Describes the socio cultural and ethnic differences in the student population and is able to link tendency for certain health problems to individual groups.				
School Nurse Competencies 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)					
		Met			
		Y	N	Date	Comments/ Initials
E20	Demonstrates competence in providing appropriate healthcare services to students coming to the health office and others in the school setting.				
E21	Demonstrates ability to assist in use of and/or interprets the following:				
	Asthmatic equip – inhaler, spacer, nebulizer, Peak flow meter				
	Diabetic equip – insulin syringe, insulin pump, glucometer, carb counting				
	Emergency equipment, i.e. defibrillator				
	Explain if other:				
E22	Demonstrates ability to respond to emergencies involving students/staff				
		Met			
		Y	N	Date	
	Asthma attack				Insulin reaction
	Grand Mal seizure				Loss of permanent tooth
	Fracture/sprain				Eye injury
	Head injury, spinal injury				Chemical/2 nd or 3 rd degree burn
	Sickle Cell emergency				Allergic reaction
	Explain if other:				
	*Competency for each (E21 and E22) must be demonstrated under direct observation by the preceptor.				
E23	Demonstrates competence in managing acute injuries and other medical emergencies; assesses and provides appropriate emergency first aid.				
E24	Demonstrates competence in caring for students with chronic health problems, and in formulating appropriate Individual Healthcare Plans and Emergency Action Plans that ensures child safety and optimal learning.				
E25	Demonstrates competence in caring for the medically fragile and competently carries out specialized physical health care procedures, i.e., tracheostomy care, gastrostomy feedings, a clean catheterization.				
E26	Demonstrates competence in managing children identified as having a communicable disease condition, makes good judgment calls in following through with school population, referral, and follow-up.				
E27	Demonstrates ability to case manage the multifaceted health care needs of a child, i.e., assists families with affordable health care and coordinating services within the school and community.				
E28	Demonstrates ability to participate as a member of the SST, IEP team and completes appropriate assessment and paperwork for an IEP and 504 plan.				
E29	Demonstrates competence in administering medication in the school setting, states 5 rights, proper storage, management, and documentation.				
E30	Describes the alarm system that signals a school wide emergency and the action steps that students and staff need to take in the event of a school wide or natural disaster, threat of an intruder, and the school nurse role.				

School Nurse Competencies 3. Professional Management Skills						
		Excellent = 5 and Poor =1				
		5	4	3	2	1
E31	Demonstrates leadership and the ability to use professional knowledge, skills, and ethical decision making to promote the overall health of the school community and of individuals.					
Comments:						
E32	Describes a realistic plan for organizing and implementing an overall school health program that considers uniqueness of population and cultural differences.					
Comments:						
E33	Reiterates (give examples of) legal guidelines of school nursing practice, i.e., sections of Ed. Code, other state and federal laws as they applied to health services, program planning, health promotion and teaching.					
Comments:						
E34	Demonstrates ability to model evidence-based healthcare practices in the delivery of school nursing services (research), as well as use a theoretical base to guide practice.					
Comments:						
E35	Demonstrates the ability to advocate appropriately with students, families, community, and others to promote healthy behaviors and lifestyles.					
Comments:						
E36	Demonstrates ability to communicate with clarity and professionally, both orally and in writing, with professionals, families, and students.					
Comments:						
E37	Demonstrates ability to work in a collaborative and collegial manner with others in a public education system, with understanding for the structure and authority of school district administration.					
Comments:						
E38	Demonstrates ability to organize and maintain accurate and complete health records.					
Comments:						
E39	Demonstrates the ability to use time effectively, and manage fiscal and personnel resources prudently.					
Comments:						
E40	Demonstrates the ability to train, supervise, and monitor others who may assist students in taking medication and/or provide specialized physical healthcare procedures to students.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Clinic held at school site, i.e. immunization, dental screening ☐ Community agencies, i.e. CCS, CVRC, other ☐ Faculty/school staff in-service ☐ Conducted health teaching in a classroom	☐ Infant stimulation program (0-3 years) ☐ Preschool program ☐ Student Attendance Review Board ☐ School nurse in-services, conferences

California State University, Fresno
School Nurse Services Credential Program

EXPERIENCED SCHOOL NURSE PROJECT PROPOSAL

For students with two or more years of school nursing experience at the elementary level.

Up to 20 hours of practicum time may be used for a project relevant to school nursing with significance to other school nurses and/or school district. If the full 20 hours are not used, the remaining hours must be spent in other clinical activities to fulfill the required number of practicum hours for the semester. Project journaling activities must be separate from other clinical journaling and a log of hours must also be kept.

This project must:

- Be approved by your preceptor as indicated by his/her signature below.
- Be based on a school nursing need in your district or that of your preceptor.
- Include an end product that can be evaluated by your preceptor and clinical instructor.
- Include documentation of progress in your clinical journal of hours spent and progress made. Documentation is to be titled and separate from other weekly journal entries.
- Include a proposal and justification (see below).

Student Name_____

Proposal:

Justification:

Preceptor project proposal approval

(Signature)_____ Date_____

Final project review by preceptor:

(Signature)_____ Date_____

FAX project proposal, signed by preceptor, to clinical instructor for initial approval. After project is completed, the original, with final preceptor signature, is to be mailed to instructor.

UNIVERSITY POLICY STATEMENTS

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in Madden Library 1049 (278-2811).

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the [Class Schedule](#) (Policy/Legal Statements) or the [University Catalog](#) (University policies)

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information [Technology Services](#) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

Copyright policy: Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its [copyright web page](#).

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Important note: This syllabus is subject to change due to unforeseen circumstances. Written substitution will be provided should this occur.

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program
2010-2011

To Immediate Supervisor of Employed School Nurse Services Credential Program Student:

Regarding (student) _____

The school nurse who is currently employed full-time by a school district, who has not yet completed the practicum portion of the CSUF School Nurse Services Credential program, needs the opportunity to work under the direct supervision of an experienced fully credentialed school nurse preceptor. To ensure an optimal uninterrupted learning experience, the student must spend time away from his/her own place of employment during regular school hours.

The CSUF post-baccalaureate School Nurse Services Credential Program course of study meets the educational requirements established by the CCTC (California Commission on Teacher Credentialing) for the Clear Professional School Nurse Services Credential. Nurses who currently hold a preliminary credential have five years to complete educational requirements to obtain a Clear Credential in order to continue practicing school nursing after five years.

Employed school nurse students are required to take 80 hours of practicum per semester for two semesters, elementary experience in the fall and secondary experience in the spring. That amounts to approximately six hours per week over the course of two semesters that an employed school nurse student will need to be away from his/her worksite. For a meaningful clinical experience, that should include both morning and afternoon hours. There is some flexibility in scheduling clinical hours, for example, selecting the most convenient days/times to be away from a worksite; community involvement and school nurse meetings after school hours, and some leadership roles and projects can be completed at the student's own worksite. Note: Students employed as school nurses are automatically given 40 hours credit, while those students not employed as a school nurse are required to complete 120 hours.

Thank you for working out a schedule that will meet the needs of both your school district and that of your school nurse in allowing this student the necessary time away from his/her place of employment to complete the required number of clinical hours which must be completed under the supervision of a qualified preceptor. Having a fully credentialed school nurse benefits your district and will bring assurance of ongoing qualified school nursing services.

Sincerely,

Beverly Miller, Program Coordinator

For questions contact Beverly Miller by phone at (559) 278-6252 or by E-mail at bmiller@csufresno.edu

Syllabus: NURS 185

School Nurse Seminar

Fall 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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BMM-12/09

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(Note: These page numbers do not correspond to this Program Assessment document)

CSUF DEPARTMENT OF NURSING
SCHOOL NURSE SERVICES CREDENTIAL PROGRAM

Course Number: N185
Course Title: School Nurse Seminar
Units: 3 Units
Prerequisites: CDDS 125 – Audiology/Audiometry for SN, Audiometrist Certificate
NURS 184 – Introduction to School Nursing
NURS 136 - Health Appraisal
NURS 137 - Health Teachings
COUN - 174 or 200
SPED 120 – Introduction to Special Education

Note: Approval must be obtained from the program coordinator to take prerequisites concurrently with core courses or to take equivalent prerequisite courses at another university.

Faculty: Beverly A. Miller, RN, MPA/HS
Office: McLane Hall, Room 288
Office hours: Monday, Wednesday, Friday 10:30-4:30 P.M.
Phone: (559) 278-6252
FAX: (559) 278-1013 or (559) 278-6360
E-mail: bmillers@csufresno.edu

Nancy Busch, RN, MA
Office: McLane Hall, Room 288
Office hours by appointment only
Phone: (Request phone contact via email)
FAX: (559) 278-1013 or (559) 278-1013
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CSUF: CSU Fresno, Department of Nursing
2345 E. San Ramon Ave. M/S MH 25
Fresno, CA 93740-8031
Phone: (559) 278-2041
FAX: (559) 278-6360

Catalog Course Description:

Role of the school nurse; parameters of school health practice; emphasis on adolescent health issues, health education, legal parameters, interdisciplinary cooperation, legislative issues, research, and professional accountability. (Online)

NURS 185 SPRING 2010 COURSE CALENDAR OF ASSIGNMENT DUE DATES

Tuesday 1/25/10	Beginning of First Week of Class
Due Dates	ASSIGNMENTS Note: All written assignments to be sent through Blackboard Assignment Drop-Off.
2/11/10 - 2/14/10	CSNO Annual Conference. Renaissance Hollywood Hotel. Note: FYI, attendance not required . Instructors will be attending conference and will plan to meet and network with students and preceptors who do attend. Time/place TBA.
Module I Due Monday 2/22/10 Weeks 1-4	<u>Module One</u> : See Scheduled Course Contents, p. 5. * Researched responses to 1 question for each week - 1, 2, 3, & 4. * Responses to 2 Blackboard presentations posted for each week - 1, 2, 3, & 4. * *Interdisciplinary Paper
Module II Due Monday 3/22/10 Weeks 5-8	<u>Module Two</u> : See Scheduled Course Contents, pp. 5-6. * Researched responses to 1 question for each week - 5, 6, 7, 8. *Responses to 2 Blackboard presentations posted for each week - 5, 6, 7, & 8. * Research paper on an adolescent mental health related issue(s) or a book report on one of the books indicated in syllabus (See syllabus, pp. 14-15).
3/29/10-4/2/10	<i>Spring Break</i>
Module III Due Monday 4/26/10 Weeks 9-12	<u>Module Three</u> : See Scheduled Course Contents, p. 6. * Researched responses to 1 question for each week - 9, 10, 11, & 12. * Responses to 2 Blackboard presentations posted for each week - 9, 10, 11, & 12. * No additional assignments due with this module.
Legislative Report Monday 5/10/10	*On Blackboard, share highlights, pros/cons of bill selected related to legislative assignment. If visit made to legislator's office, share that experience with classmates.
Module IV Due Monday 5/17/10 Weeks 13-15	<u>Module Four</u> : See Schedule Course Contents, pp 6-7. * Researched responses to 1 question for each week -13, 14, &15. * Responses to 2 Blackboard presentations posted for each week - 13, 14, &15. * Legislative Paper * Completed evaluations relevant to course

AREA SUPPORT GROUPS AND PRESENTATION PARTNERS

Prior to the beginning of Phase II, course instructors assigned students to 'support groups' in their area of the state. With no objections, support group members were provided email addresses of fellow group members for networking purposes. Group networking gatherings and group fieldtrips relevant to coursework are encouraged. Within each support group, partnerships that were created in NURS 184 will continue in NURS 185 for the purpose of developing a Blackboard presentation once during the semester. Note: Students may also choose to work independently, or if there is interest in changing partners, contact your course instructor. (See p.13).

SCHEDULED COURSE CONTENT

Module One (Wks. 1, 2, 3, 4) January 25, 2010 to February 19, 2010

Adolescent Health Issues * Promoting Student Success * Coordinated School Health Programs *
Related Standards of Practice * Empowerment in SN Practice * Evidence Based Practice *
Health Promotion and Education * The Group Process * School Nurse Visibility *

Week 1, 1/25/10-1/20/10:

Meeting the educational needs of students in middle school and high school; alternative education; adolescent behavior and impact on health and learning; age appropriate teaching and learning; adolescent growth and development; teacher stress and coping; special education at the secondary level; school nurses in the leadership role.

Week 2, 2/1/10-2/5/10:

School nursing at the secondary level: Coordinated school health programs, community and family involvement; standards of practice in school nursing; theory based practice; nursing standardized protocols; understanding adolescent behavioral and health issues; empowerment in school nursing; functions and management of the health office.

Week 3, 2/8/10-2/12/10:

Adolescent preventive services, healthy promotion and disease prevention for adolescents through coordinated programs, funding sources, the uninsured adolescent and insurance programs, coordinating a health fair; confidentiality and consent; promoting SN visibility.

Week 4, 2/15/10-2/19/10:

Evidence based practice; framework for teaching health education; the school nurse as health educator; the Group Process; creating and facilitating groups; Comprehensive Health Education Model; self confidence as a presenter; sex education for special learners; giving school board presentations; related standards of practice.

Module Two (Wks. 5, 6, 7, 8) February 22, 2010 to March 19, 2010

The Role of the School Nurse Role in Meeting Adolescent Health Needs * The Young Athlete * Physical Education * Adaptive P.E. * Sports Injuries * Adolescent Nutrition * First Aid * Driver Training * Substance Abuse * Sexually Transmitted Diseases * Teen Pregnancy and Parenting.

Week 5, 2/22/10-2/26/10:

The Bill of Rights for Young Athletes; adolescent activity and fitness; common sports related injuries and emergency first aid; nutrition and weight control issues for athletes; the female athlete; physically challenged athletes; Adaptive P.E.; driver Ed; and role of the school nurse.

Week 6, 3/1/10-3/5/10:

Substance abuse: Drugs, alcohol, smoking and other inhalants; ergogenic substances; factors leading to abuse; assessment and recognition of substance abuse; health promotion and education, prevention and cessation programs; legal codes; role of the school nurse.

Week 7, 3/8/10-3/12/10:

Adolescent risky behavior and sexual activity; prevalence of sexually transmitted diseases; role of the school nurse in health promotion and education related to prevention and communicable disease control, history taking, referral and follow-up; community resources; relevant sections of the CA Education Code sections.

Week 8, 3/15/10-3/19/10:

Pregnant and parenting teens; historical perspective and statistics; impact on teen parents and child; child abuse reporting and sexual behavior; programs and community resources; Education Code and other laws; health promotion and pregnancy prevention role of the school nurse in counseling, referral, and health supervision.

Module Three (Wks. 9, 10, 11, 12) March 22, 2010 to April 23, 2010

Role of School Nurse: Adolescent Mental Health & Behavioral Issues * Suicide * Truancy & School Refusal * Sexual Harassment * Bullying & Violence * School Safety * Racial & Ethnic Issues * Crisis Intervention * SBCs * Community * Politics 101 * Performance Evaluation

Week 9, 3/22/10-3/26/10:

Adolescent mental health and behavioral issues: Psychosocial interviews; psychiatric and emotional problems; anxiety disorders; self injury; eating disorders; Oppositional Defiant Disorder; Schizophrenia; school age and adolescent stress related issues, family and date violence; role of the school nurse.

Spring Recess – Week of March 29 – April 2, 2010

Week 10, 4/5/10-4/9/10:

Adolescent mental health and behavioral issues: Self-punitive behavior, gay and lesbian youth, bullying and bullying prevention, sexual harassment, types and subtypes of depression, suicide and suicide prevention, SCT interventions, role of the school nurse.

Week 11, 4/12/10-4/16/10:

Safe schools: Disaster preparedness; crisis intervention and postvention; emergency action plans; collaboration in school safety; gangs and violence; hate motivated behavior; racial and ethnic issues; anger management; role of a volunteer; role of the school nurse.

Week 12, 4/19/10-4/23/10:

School based health centers; community outreach, collaboration, and partnerships; politics 101 for school nurses; legislative advocacy; defining competency in school nursing; school nurse competency and performance evaluation.

Module Four (Wks. 13, 14, 15) April 26, 2010 to May 14, 2010

Role of the School Nurse in Research * Grant Writing * Publishing * Medi-Cal Billing * TCM * Legal & ethical issues * Student Suspension and Expulsion * Technology in SN * Resource Mapping * Professional Standards Review * Professional Connections & Continued Growth

Week 13, 4/26/10-4/30/10:

The benefits of research in school nursing; applying research in practice; role of the school nurse in research projects; grant writing; and publishing articles and research findings.

Week 14, 5/3/10-5/7/10:

Legal and ethical issues in school nursing; pursuing justice in the courts, minor consent, suspension and expulsion; Targeted Case Management; Medi-Cal Administrative Activities (MAA); LEA billing, enrollment and accountability; resource mapping for health services.

Week 15, 5/10/10-5/14/10:

Reviewing standards of school nursing practice; quality assurance; concept of school nurse community; staff recruitment; professional connections and continued growth; health office design issues and use of computer technology; revising your philosophy of school nursing.

COURSE OBJECTIVES

Upon completion of this course the student will be able to:

1. Explain the role of the secondary school nurse in light of legal guidelines, ethical decision making, and standards of practice.
2. Discuss contemporary health/social issues pertinent to the secondary student population.
3. Discuss application of the nursing process, relevant theories, conceptual frameworks, and research in meeting the health care needs of adolescents.
4. Discuss the role of the school nurse involvement in coordinated school health programs.
5. Discuss importance of school nurse involvement in interdisciplinary collaboration within the school and in the community in order to more fully meet the health related needs students.
6. Describe importance of a school nurse voice and participation in the legislative process and political advocacy for school age children, families, and school nursing interests.
7. Discuss importance of research and participation in research activities in school nursing.
8. Discuss importance of school nurse involvement in health promotion and health education, including curriculum development and facilitation of small groups to enhance learning.
9. Describe the various ways where by funding can be obtained for program development.
10. Describe the value of promoting the school nurse image in the school setting and in the community in order to reach a optimal level of effectiveness in school nursing practice.
11. Discuss need for school nurse accountability and evaluation of practice in order to identify strengths and weaknesses.
12. Explain the application of professional dispositions in school nursing practice.

MODULE OBJECTIVES

Upon Completion of Each of the Following Modules the Student will be able to:

Module One (Weeks 1-4)

Issues Relating to Secondary Education * Role of the School Nurse in the Following:
Comprehensive School Health Programs * Provider of Adolescent Health Services * Health Educator * Member of the Education Team.

1. Discuss the role of the school nurse as program manager at the secondary setting.
2. Discuss legal and ethical guidelines related to adolescents and school nurse practice.
3. Identify developmental stages of adolescence and associated theories.
4. Describe adolescent risky behavior, health issues and related attitudes.
5. Describe use of the nursing process in meeting the health care needs of adolescent.
6. Discuss community involvement in provision of coordination of school health services.
7. Describe use of at least 3 theories/models for school nursing practice at secondary level.
8. Discuss importance of interdisciplinary collaboration for school nurse at secondary level.
9. List 5 ways the school nurse can maintain visibility on campus and in the community.
10. Discuss the importance of a comprehensive school health program at the secondary level.

11. Explain health ed. as an integral component of a comprehensive school health program.
12. Describe the group process, instituting groups, and evaluating their effectiveness.
13. Identify key components of curriculum planning, development, and evaluation.
14. Describe the development of health curriculum utilizing the nursing process, conceptual frameworks and current research.

Module Two (Weeks 5-8)

Role of the School Nurse Regarding: Meeting Adolescent Health Needs * Physical Education * Driver Education * Sports Injuries * Adolescent Nutrition * Substance Abuse * Sexually Transmitted Diseases * Teen Pregnancy and Parenting.

1. Discuss primary, secondary, and tertiary health care in meeting needs of adolescents.
2. Describe injuries associated with athletes, their treatment and prevention.
3. Describe issues related to confidentiality and counseling with adolescents.
4. Discuss the role of the school nurse in assisting students with special needs in fitting into P.E. programs.
5. Compare the difference between the nutritional needs of athletes and that of the general adolescent population.
6. Identify risk factors associated with teen pregnancy rate and effective school and community interventions.
7. Discuss programs in secondary school settings to meet the needs of pregnant and parenting teens.
8. Discuss sexuality education and the normal development of sexual awareness/orientation.
9. Discuss sexually transmitted diseases, statistics and treatment, role of school nurse.
10. Discuss confidentiality and ethical issues associated with counseling adolescents.
11. Discuss problems associated with alcohol and drug addiction, and treatment programs.
12. Discuss school and community programs to prevent/stop smoking and related Ed. Codes.

Module Three (Weeks 9-12)

Role of the School Nurse Regarding: Adolescent Mental Health and Behavioral Issues * Suicide * Truancy and School Refusal * Sexual Harassment * Bullying and Violence * School Safety * Crisis Intervention.

1. Describe precursors to emotional disorders and behavior problems in adolescents.
2. Discuss identification, counseling, referral of students with suspected mental health issues.
3. List three psychiatric disorders commonly seen in adolescents, their signs/symptom, treatment and role of the school nurse.
4. Discuss issues relating to truancy/school avoidance and the role of the school nurse.
5. Discuss the issues associated with gay and lesbian youth and the role of the school nurse.
6. Discuss issues related to bullying and interventions to control the problem.

7. Discuss self-punitive behavior among some students and the role of the school nurse.
8. Describe sexual harassment in the school setting and steps to take to prevent/stop it.
9. Describe issues related to violence/gang presence and role of schools/community.
10. Discuss suicide prevention/intervention and role of the school nurse.
11. Discuss intervention steps in the event of a suicide or death of a student or staff member.
12. List steps that school districts/community is taking to curb violence and gang issues.
13. Discuss the development of a school crisis team, its purpose, and school nurse role.
14. Discuss what the State of California has to say about safe schools and the responsibility of school districts in developing policies.

Module Four (Weeks 13-15)

Role of the School Nurse as it relates to School Based Clinics * Performance Evaluation * Legislative Issues * Politics 101 * Research * Grant Writing * Publishing * Medi-Cal Billing * Legal and Ethical Issues Related to Adolescent Behavior * Technology use in School Nursing.

1. Explain complementary roles of the school nurse and NP in school-based clinic setting.
2. Discuss value of school based clinics and feasibility of establishing a school based clinic.
3. Discuss school -community linked health care programs to optimize services to children.
4. Define school nurse competency and framework for professional expectations.
5. Discuss the need for political action on the part of school nurses as a means of advocating for school age children and school nursing.
6. Discuss importance of research in school nursing and give at least 3 examples.
7. Discuss grant writing steps to obtain funding for research, projects, and programs.
8. Discuss general expectations in grant writing and identify 3 funding sources.
9. Discuss value of writing for publication and importance in school nursing.
10. Discuss purpose of Medi-Cal billing and use of funding to benefit school age children.
11. Explain Targeted Case Management as it relates to school age students.
12. Define an LEA (local education agency/school district) and services provided.
13. Discuss legal and ethical issues related to adolescent rights and behavior.
14. Discuss use of technology in the health office.

TEACHING STRATEGIES

Students are asked to research responses to weekly questions/case scenarios using identified sources, develop a Blackboard presentation based on weekly subject matter once during the semester, read through weekly Blackboard presentations by classmates and respond to prompts by presenters directed at encouraging class discussion, and other written assignments as indicated. Blackboard discussions are monitoring by faculty with input as appropriate.

READING REQUIRMENTS

Reading assignments will be from texts, journals, lecture notes, and selected websites based on weekly subject matter and each student's needs according to course objectives and assignments.

REQUIRED TEXTS AND OTHER PUBLICATIONS

(Order through CSUF Kennel Bookstore unless otherwise indicated)

Miller, B. (2010). *Nursing 185 Weekly questions booklet*. CSUF: Author.

Berman, A., Jobes, D. A.; Silverman, M. M. (2007). *Adolescent suicide* (2nd Ed.). Washington, DC: American Psychological Association.

California Department of Education. (2003). *Health framework for California public schools: Kindergarten through Grade Twelve*. Sacramento, CA: Author.

Marx, E., Wooley, S. F. & Northrop, D. (1998). *Health is Academic: A Guide to coordinated school health programs*. New York: Teachers College Press.

National Association of School Nurses. (2005). *School nurse: Scope and standards of practice*. Scarborough, ME: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F. A. Davis Co.

NOTE: Students may select one of the following books on which to write a report or students may choose to write a research paper based on adolescent behavioral or mental health issue(s).

Greenberg, Michael. (2008). *Hurry down sunshine*. NY: Random House Inc.

Gurian, M. (1996). *The wonder of boys: What parents, mentors and educators can do to shape boys into exceptional men*. NY: Jeremy P., Tarcher, Pulman.

Kindlon, D. & Thompson, M. (2000). *Raising Cain: Protecting the emotional life of boys*. NY: Ballantine Books.

Piper, M. (1994). *Reviving Ophelia: Saving the selves of adolescent girls*. NY: Ballantine Books.

Rubin, T. I. (1998). *David and Lisa*. New York, NY: Tom Doherty Associates, Inc.

RECOMMENDED TEXTS AND OTHER PUBLICATIONS

Lewis, K. D. & Bear, B. J. (2008). *Manual of school Health* (3rd ed.). NY: Saunders. (Order through CSNO)

Sullivan, A. & Anderson, S. (2000). *Care of the young athlete*. Library of Congress Cataloging –in–Publication Data: American Academy of Orthopaedic Surgeons and American Academy of Pediatrics. (May be purchase through CSUF Kennel Bookstore)

Note: All California School Nurses Organization and National Association of School Nurses Publications are excellent resource materials and recommended.

Ordering Information for Texts and other Publications:

CSU, Fresno Kennel Bookstore by email www.kennelbookstore.org, or call (559) 278-6634.

American Academy of Pediatrics publications by email www.aap.org/bookstore.

California Department of Education, Bureau of Publications, Sales Unit, P.O. Box 271.
Sacramento, Ca 95802-0271. Or (916) 445-1260 or 1-800-995-4099, fax 916-323-8023.)
California School Nurses Organization by email <http://www.csno.org>.

National Association of School Nurses publications by email <http://www.nasn.org>.

GRADING CRITERIA

As follows: A = 90-100%; B = 80-89%; C = 70-79%; D = 60-69%; F= 59% and below.

ASSIGNMENTS / EVALUATION

<i>Assignment</i>	<i>Points</i>
N185 Manual, researched questions/case scenarios (@ 2.0 pts. each X 14)	28.0
Student participation in Blackboard weekly discussions (@ 1.0 pts. each X 29)	29.0
Creation of one Blackboard presentation	10.0
Monitoring personal Blackboard presentation Interdisciplinary Paper	3.0
Interdisciplinary Paper	10.0
Book Report or Research Paper on adolescent mental health issue(s)	10.0
Legislative Paper and letter/visit to legislator	10.0
<i>Note: See assignment guidelines for details</i>	
Total	100.0

ASSIGNMENTS

I. Development of a ‘Personal Reference Manual.’

- A. In this course students are expected to develop a personal reference manual, electronic or hard copy, for their personal use in their own school nursing practice.
- B. It is suggested that the manual include the following:
 - 1. Researched responses to selected weekly questions. (N185 Weekly Questions Booklet)
 - 2. Copies of Blackboard presentations including information sources.
 - 3. Copies of other assignments and information of value to the student.

II. Choosing a Question for a Blackboard Presentation:

- 1. Nine (9) clusters of questions (referred to simply as ‘questions’) can be found in the N185 Weekly Questions Booklet for each week.
- 2. Two (2) weekly questions will be used as basis for Bb presentations by classmates:
 - a. There are two Blackboard presentations by student presenters each week.
 - b. Partners, or may be an individual student, will be responsible for just ONE Blackboard presentation during the semester based on a weekly question. (Note: Depending on class size partners may or may not be an option).
 - c. Students entering N185 from N184 will have had the opportunity at the end of the fall semester to select a week in N185 in which to do their presentation.
 - d. In the beginning of the semester, partners (or an individual), are to review the list of questions for their chosen week found in the N185 Weekly Questions *Booklet* and will choose two questions in order of preference on which to base their Bb presentation. The instructor is to be notified of choices through “Ask Your Instructor” on the N185 Discussion Board. Your instructor will notify students as to which question they will be able to use for their presentation.
 - e. Presentations for weeks one and two will be provided by the instructor or may be created by students who specifically request an “early bird” presentation date.
 - f. By the beginning of the second week, students will be notified as to which weekly questions classmates have selected for their Blackboard presentations for the entire semester, thus giving all students the opportunity to plan and work ahead.

III. Guidelines for Blackboard Presentations:

- A. Purpose, to enhance student learning through class participation and discussion.
- B. What needs to be taken into consideration in creating a Blackboard presentation:
 - 1. Presentations should stress key points of meaningful information relevant to school nurses practice.
 - 2. Presenters **must** tie their presentation to relevant Education Code sections, district policies, CSNO/NASN Position Statements, theories and research findings that apply.
 - 3. Sources where information was found must be cited for the benefit of readers.

4. Length will depend on type of presentation, i.e., a word document, 4-5 pages, using APA format or 'complete' outline form; PowerPoint presentations should provide enough information to give the reader meaningful insight into the subject matter.
 5. Presenters who choose to do a PowerPoint presentation must post it as an attachment on the Blackboard Discussion Board. The PowerPoint must be developed from a quality outline which must be posted in a separate attachment for classmates who may have problems opening the PowerPoint presentation for technical reasons.
 6. Presentations should be visually appealing to stimulate reader interest, although importance will be placed on the quality and value of the information shared.
- C. At the end of each presentation **presenters must create a case scenario** that the reader can relate to his/her own school nursing practice. The case scenario is to be based on the information shared in the presentation and must encourage readers to do one of the following:
1. Share relevant experiences specific to his/her own school nursing practice, i.e. A client care issue, a policy, a program, an ethical dilemma, role as a case manager;
 2. Contribute additional information to strengthen the presentation, such as recent research findings, a relevant theory; a legal or political tie-in; new legislation; a funding source, useful website, community resource, etc.
 3. Encourage readers to share additional information relevant to the scenario and/or the presentation, i.e., research; theories; legal and political issues; recent bills/legislation, grant/funding sources, websites, valuable service agencies, etc.
 4. To be a creative thinker and a problem solver.
- D. Bb Presentation **must** be posted on Blackboard **no later than the Friday** prior to week due in order to give classmates time to read through it and participate in timely discussion.
Note: Steps for posting presentations found in the N185 Weekly Questions Booklet Appendix.
- E. Presenters are responsible for **actively** monitoring discussion following their presentations by responding to questions from readers, including additional information as appropriate, and following up promptly on complaints of technical problems opening the PowerPoint.

Note: *Monitoring points deducted if technical problems are not resolved within the first 48 hours!*

IV. Participating in Discussion Following a Blackboard Presentation:

- A. Guidelines for participating in discussion on Blackboard following the presentation.

1. Read through the presentation.
2. Respond to the case scenario or prompt at the end of the presentation. The response should ideally be a quality paragraph or more. (*Note: A paragraph includes an opening sentence, at least three supporting sentences, and a closing sentence.*)
3. Also respond to a posting by ONE other reader to keep discussion moving.
4. If the presentation is from a previous semester, see Bb for participation guidelines.
5. Readers are asked to critique each Blackboard presentation using the “Star” system located in the presentation forum. **Note: Star rating is anonymous!**

Note: Reader responses to weekly presentations and participation in discussion will be monitored by faculty on the Discussion Board.

V. Selecting and Researching ONE Weekly Question on Your Own:

- A. Of the remaining 7 questions for each week, students are to choose ONE question to research and write up on their own and submitted electronically with other module work.

***Note:** Bb Presenters are not required to write up an individual research question the week they do their Blackboard presentation. They must, however, respond to the other Blackboard presentation for that same week.*

- B. Guidelines for writing up research questions:

1. Responses should be type written in APA format - Double spaced with 1” margins, using 12 font (See Appendix of N185 Weekly Questions Booklet for APA format.).
2. Questions must be restated at the beginning of the response (Single spaced, and shrunk to size 10 font.).
3. Responses to questions should be succinct, but conveying a good understanding for the subject matter.
4. Sources must be cited correctly where information is found to answer the question.
5. Suggested length of responses 2 pages with sources cited on a separate page.

Summary: Students will, directly or indirectly, respond to three questions out of the NURS 185 Weekly Questions Booklet **each week**:

- One question (directly), a research question students will select to write up on their own;
- Two questions (indirectly) which were previously selected by fellow classmates as a basis for a Blackboard presentation and which you (reader) will read and respond to as indicated. **NOTE: The sources where information can be found to respond to weekly questions is immediately following each question. See Weekly Questions Booklet.**

VI. Interdisciplinary Paper: Due with Module I

- A. Spend time with three different school professionals (1.5 - 2 hours with each), interviewing them and observing their typical day at work. These individuals must be professionals who

hold a degree and who work in an educational area other than nursing, i.e., principal, psychologist, RSP, SDC or classroom teacher, speech therapist, high school counselor, etc.

1. Describe the role of each and the type of contact they have with students.
2. Give examples of things that you have observed about their work.

C. Choose and include at least 5 of the following prompts in your write up:

1. What is this individual's educational background and years of experience?
2. How often does this individual collaborate/communicate with the school nurse? With the classroom teacher? With students and their families? Other professionals?
3. What value does this individual place on interdisciplinary communication/collaboration as it related to helping students, families, working with team members?
4. Is this person child-centered or family-centered in his/her approach? Explain.
5. Ask this person to share an example of a successful team effort to help a child/family.
6. What is this persons understanding of coordinated school health services?
7. Other professional involvement besides participating as a member of the education team, i.e. service on a task force/school site committee?
8. What importance does this professional place on membership/involvement in his/her professional organization? Is he/she a member?

D. For each professional interviewed 1) Summarize responses to at least 5 prompts as noted above. (2) Describe this professional's understanding of the school nurse role and what this professional expects from the school nurse as a member of the educational team. Comment on information you may have needed to share with this individual about your role. 3) Describe the importance you place on the role this member plays as a member of the team.

E. In closing paper, write a general summary Describing on the value you place on getting better acquainted with these other professionals. Review Standard Eleven (11) in *School Nursing: Scope and Standards of Practice* and describe which measurement criteria best reflects this assignment and why.

F. Write a 3-4 page paper using APA format. (Submit electronically with other module I work.)

Note: Actual time spent at secondary level observing professionals counts toward NURS187 clinical hours.

VII. Selected Assignment. Complete ONE of following 2 Assignments: Due Module Two

A. Selection 1:

1. Report on ONE of the following books:
 - 1.Greenberg, Michael. (2008). *Hurry down sunshine*. NY: Random House Inc.

2. Gurian, M. (1996). *The wonder of boys: What parents, mentors and educators can do to shape boys into exceptional men*. NY: Jeremy P.
 3. Kindlon, D. & Thompson, M. (2000). *Raising Cain: Protecting the emotional life of boys*. NY: Ballantine Books.
 4. Piper, M. (1995). *Reviving Ophelia: Saving the selves of adolescent girls*. NY: Ballantine Books.
 5. Rubin, T.I. (1998). *David and Lisa*. NY: Tom Doherty Associates, Inc.
2. From the book, select three case scenarios and/or behavioral/emotional issues to discuss that you found particularly insightful/valuable for your SN practice. Discuss the behavioral/psychiatric problem(s), precursors, stressors, resolutions, counseling techniques, and treatment. Address cultural issues if appropriate.
 3. How has this insight changed your own attitude and/or given you a greater understanding for adolescent emotional/behavior issues and/or psychiatric problems?
 4. How will this insight benefit you in your school nursing practice and/or help you in working with students at the secondary level?
 5. Write a 3-4 page paper using APA format. Submit electronically with Module II other work.
 6. Share your opinion about the book and insight you gained with fellow students on Blackboard. (A forum will be open on the N185 discussion board for this purpose.)

B. Selection 2:

Write a research paper based on one of the categories listed below with emphasis on the adolescent behavioral/mental health issues that lead up to the problem, i.e., precursors, i.e., stressors, cultural issues; interventions. Discuss counseling techniques, treatment of the issues and/or physical condition, and role of the school nurse.

1. Select one of the following categories:
 - a. Teen pregnancy
 - b. STDs, AID
 - c. Substance abuse (Select one: Drug use, alcohol, smoking)
 - d. Depression, suicide
 - e. Sexual harassment, date rap
 - f. Truancy, dropout, delinquency
 - g. Gang involvement and/or violence behavior
2. Apply a developmental/adolescent theory (e.g., Erikson, Marcia Selman, Jessor, Piaget). Use “Google” to find a theory that will match your research.

3. Apply Neuman Systems Model, or another relevant nursing theory.
See following website at http://www.nurses.info/nursing_theory.htm.
4. Incorporate current research findings to support your paper. Review three current articles, one source can be a website with relevant information.
5. Cite statistics or examples of the problem from your school district.
6. Include community resources availability to address the problem/interventions/programs (e.g., programs for substance abuse, pregnancy, etc.).
7. Identify proactive measures to prevent or ameliorate the problem early (primary, secondary prevention).
8. Write a 3-4 page paper, plus reference page. Submit electronically with other Module II work.
9. Briefly summarize research/findings on Blackboard for fellow students. (A forum will be provided on the Nursing185 Discussion Board for this purpose.)

VIII. Legislative Paper

Due Module Four

- A. Identify a bill or some proposed legislation (state) that has the potential to affect the school health program, school age students, or school nursing practice in California. Start by going to the CSNO website at www.csno.org and look for a bill that has been identified by CSNO. If you do not find one there, go to the CA Teachers Assoc. website at www.cta.org and/or State of CA website at www.leginfo.ca.gov.
- B. Write a 2 to 3 page paper, using APA format, delineating the possible effects of this legislation on children/education/school nursing. State your position for or against this legislation. Include a copy of the bill found at one of the websites noted above. (Submit completed assignment electronically along with other Module IV work on due date indicated.)
- C. Use the following prompts to guide your write up:
 1. Does CSNO support/oppose this bill?
 2. What organizations are behind it or against it? Why?
 3. Give examples of methods of political action that can be effectively utilized by school nurses to lobby for or against this legislation.
 4. Are there alternatives or compromises that you could propose?
 5. Cite references.
 6. Go to either (D) or (E) below.
- D. Letter of support/nonsupport. Using guidelines for letter found in the *CSNO Advocacy Handbook* at the CSNO website (www.csno.org). Write a letter of support/non support for this bill to a legislator, legislative committee, or other. Follow through with sending the letter.

1. Make a clear statement at opening of letter about what you want the reader to do!
2. Follow up by clearly, succinctly stating your reasons why (letter one page total).
3. State who you are (constituent, expert, etc.) and how, where you can be reached. Frequently, you will receive a letter back.
4. Include copy of the letter with your paper.
5. On Blackboard share key points of interest related to the bill by the due date indicated in N185 Course Calendar.

E. OR choose to visit a local legislator. It is recommended that you visit with a colleague.

1. Write an outline of what you will say and go over it before your visit. *See CSNO Advocacy Handbook at the CSNO website (www.csno.org) for suggestions.*
2. Plan to share your knowledge of school nursing and/or concerns.
3. Bring information about school nursing with you, i.e., brochure.
4. Bring a 'business' card or contact information to leave.
5. Include some type of documentation from the legislator's office verifying your visit.
6. Write a brief narrative of your experience and include with your paper.
7. Share your experience on Blackboard with fellow students by due date indicated. (A forum for the purpose of sharing will be opened on N185 Discussion Board. See Course Calendar for due date)

IX. Sending Completed Assignments to Instructor: The semester divided into four modules.

Module	Beginning	End	Due	Late after 11:59 PM
Module I - 4 wks	Monday 1/25/10	Friday 2/19/10	Tuesday 2/22/10	Friday 2/26/10
Module II - 4 wks	Monday 2/22/10	Friday 3/19/10	Monday 3/22/10	Friday 3/26/10
Module III - 4 wks	Monday 3/22/10	Friday 4/23/10	Monday 4/26/10	Friday 4/30/10
Module IV - 3 wks	Monday 4/26/10	Friday 5/14/10	Monday 5/17/10	Friday 5/21/10

1. Completed assignments for each module should to be electronically sent using the "Assignment Drop-Off" located in Blackboard "Assignments" section in Nursing 185.
2. **Important!** Assignment work is to be sent as ONE continuous document, which should include the following:

- a. A cover page that with the course number, module title and student's name. All work for each particular module should be included before being sent.
 - b. Module assignments that should be included: One personal researched question per week (except the week in which the student presents on Blackboard) and other assignments as indicated for that module period.
 - c. Responses to research questions should be clearly titled. Questions should be numbered and restated as indicated. Work sent should be sequentially well organized. Students may be asked to resubmit poorly organized work and points may be deducted if the work is returned after the grace period. Each researched question should begin on a clean sheet of paper.
- 3. Assignments are to be sent the Monday following the end of each completed module unless it is a holiday, in that case Tuesday. Students will have a grace period until 11:59 PM on Friday of that same week before work is considered late (exception, Saturday at 11:59 if previous Monday was a holiday).
- 4. **NOTE: 10% per week will be deducted for work received after the grace period for Modules I, II, and III. 10% per day will be deducted for late work received following the Module IV grace period.**
- 5. If work is going to be late due to an unavoidable personal circumstance, students must notify the instructor ahead of time. See late policy regarding loss of points.
- 6. Completed assignment work will be reviewed by the student's instructor and comments related to that work will be posted in the Assignment Drop-Off area in which work was initially submitted. Points will automatically be posted in the student's online grade-book (allow 10-14 days).
- 7. FYI: To take an incomplete in a CSUF course, a student must complete 2/3 of the coursework before the end of the semester and there must be a serious and compelling reason. Illness will require an M.D. note. The instructor must be notified of the student's situation well in advance of the end of semester. For details, see CSUF Catalog.

WRITTEN ASSIGNMENTS / GRADING CRITERIA

1. N185 questions researched and written up by student. 14 questions, at 2 points each
(Total 28 Pts.)

Demonstrates understanding of subject matter, depth and quality of responses	24
Questions restated, references cited, APA format or “complete” outline form	4

2. Reader response to 29 Blackboard presentations at 1.0 point for each presentation.
(Total 29 pts)

Quality paragraph in response to scenario/prompt following each presentation	0.75
Response to posting by one other reader following each presentation	0.25

3. Creation of Blackboard Presentation
(Total 13 Pts.)

Thoroughness, depth and quality of information shared	8
Creativity/format/presentation of information	2
Personal participation in monitoring and discussion following own presentation	3

4. Interdisciplinary Paper
(Total 10 Pts.)

Quality of information gained/Insight into role and responsibilities of interviewee	6
Application to SN practice/Reference to Standard 11/Summary of learning exp.	3
Writing Skill/APA Format	1

Selected Assignment (Student completes Book Report or Research Paper)

5. Book Report, adolescent mental health or behavioral issues
(Total 10 Pts.)

Insight into issues and/or problems	6
Application and evaluation regarding usefulness of knowledge to SN practice	3

Writing skill/APA format	1

6. Research Paper, adolescent health issue with emphasis on mental health (Total 10 Pts.)

Completeness/depth of analysis/evaluation of problem/Insight	6
Incorporation of current research/nursing theories/application to SN practice	3
Writing skill/APA format	1

7. Legislative Paper and letter/visit to legislator (Total 10 Pts.)

Selection of bill/rationale	2
Depth of analysis of issues involved	4
Clarity/completeness of Letter to legislator or planned/completed visit to legislator	3
Writing skill/APA format	1

Regarding quality of written work:

Careful proof reading is essential for all paperwork for the course. A paper with more than six spelling/or grammatical errors might receive a lower grade, or in extreme cases, a request to rewrite the paper. Among the evaluative criteria employed by the instructor are clarity, organization, support for ideas expressed, and grammar. The length of the paper is not as important as the above criteria.

UNIVERSITY POLICY STATEMENTS

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in Madden Library 1049 (278-2811).

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the [Class Schedule](#) (Policy/Legal Statements) or the [University Catalog](#) (University policies)

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from [Information Technology Services](#) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

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Important note: This syllabus is subject to change due to unforeseen circumstances. Written substitution will be provided should this occur.

NURS 185

Weekly Questions Booklet

Modules I, II, III, & IV

Spring Semester 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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BMM-1/10

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(Note: These page numbers do not correspond with this Program Assessment Document)

N185/N187 COURSE CALENDAR OF EVENTS / ASSIGNMENTS DUE, SPRING 2010

CLASS OFFICIALLY BEGINS FOR THE SNS CREDENTIAL PROGRAM WEEK OF 1/25/10			
Due Date	Nursing 185 Assignments	Due Date	<i>Nursing 187 Assignments</i>
Friday 1/29/10	Selection of Wk and Q for N185 presentation must be emailed to instructor by this date.		
*****	*****	Monday 2/8/10 Documents are due	Fax 559-278-1013 or send earlier by U.S. Mail: * Immediate Supervisor Approval for School Nurse to act as preceptor; * Preceptor/Student Contract (for each semester) Note: Confirm existence of U/A Agreement
2/11/10 - 2/14/10	CSNO Conference in Hollywood. (Notes: Students are NOT obligated to attend.) Faculty will plan to meet with those who do attend immediately following the Business Meeting at back of that same room. Preceptors welcome!		
*****	*****	Monday 2/15/10	* Student Goals and Learning Objectives to be sent through Bb Drop-Off for review & approval
Tuesday 2/22/10	Module I, 1/25/10-2/19/10 (Weeks 1, 2, 3, 4): * Researched responses for 1 question for each of the following weeks: 1, 2, 3, & 4; * Responses to two Bb presentations must be posted for each week 1, 2, 3, & 4. * <i>Interdisciplinary Paper</i> . (Note: Week students do Bb presentation and monitoring, no response to research Q is required.)	Tuesday 2/22/10	Module 1, 1/25/10-2/19/10 (Weeks 1, 2, 3, 4): * Final draft of Student Goals & Objectives included with Module I document - Bb drop-Off. * Initial clinical journal entries: meetings with preceptor, plans/clinical practice, impressions; * Responses to 2 journal questions; * Summary 1 journal article – adolescent issue(s) * Required participation in Bb discussion posted.
Monday 3/22/10	Module II, 2/22/10-3/19/10 (Weeks 5, 6, 7, 8): * Researched responses for 1 question for each of the following weeks: 5, 6, 7, & 8. * Responses to two Bb presentations must be posted for each week 5, 6, 7, & 8. * Book report/Research Paper (Adolescent behavioral/ mental health issues).	Monday 3/22/10	Module 2, 2/22/10-3/19/10 (Weeks 5, 6, 7, 8): * 2 nd clinical journal entries; * Two journal questions; * <i>Newsletter</i> , share on Blackboard discussion board, included with other module II work to instructor. * Required participation in Bb discussion posted.

3/29-4/2/10	SPRING BREAK		
Networking	Area support groups are encouraged plan a networking luncheon and invite preceptors during break or at end of semester. Students are also encouraged to attend local school nurse meetings together as an opportunity to network.		
Monday 4/26/10	Module III, 3/22/10–4/23/10 (Wks. 9,10,11,12) * Researched responses for 1 question for each of the following weeks: 9, 10,& 11; * Copies of responses to Bb presentation questions - 2 each week X 4 weeks);	Monday 4/26/10	Module 3, 3/22/10 – 4/23/10 (Wks. 9,10,11,12): * 3 rd clinical journal entries * Two journal questions * <i>Health Ed. Curriculum Development paper or Aggregate Teach/Small Group Activity paper.</i> * Required participation in Bb discussion.
		Monday 4/26/10	Share teaching outlines/curriculum development paper on Blackboard discussion board in N187.
Monday 5/10/10	Share interesting bills/visits to legislator on Blackboard discussion board in N185 forum.		
Monday 5/17/10	Module IV, 4/26/10-5/14/10 (Wks.13, 14, 15): * Researched responses for 1 question for each of the following weeks: 12, 13, 14, 15 *Copies of responses to Bb presentation questions - 2 each week X 4 weeks; * <i>Legislative Paper.</i> * <i>Complete Post Knowledgebase Questionnaire.</i> * <i>Complete Post Program Survey</i> * <i>Student Evaluation of Course</i>	Monday 5/17/10	Module 4, 4/26/10-5/14/10 (Wks.13, 14, 15): * 4 th clinical journal entries * Two journal questions * Required participation in Bb discussion. * Self Evaluation (1 electronic/1 hard copy) * <i>Preceptor Evaluation of Student Clinical Exp.</i> * <i>Preceptor Evaluation of Student Dispositions</i> * <i>Preceptor Course Evaluation</i> * <i>Student Evaluation of Preceptor Experience</i> * <i>Student Evaluation of Clinical Course</i>
Semester's End	Congratulations! A Certificate of Completion will be mailed to you after all documentation and transcripts for coursework have been received. See N 187 Blackboard Documents section for steps to applying for clear credential.		

SCHEDULED COURSE CONTENT

Module One (Wks. 1, 2, 3, 4) January 25, 2010 to February 19, 2010

Adolescent Health Issues * Promoting Student Success * Coordinated School Health Programs *
Related Standards of Practice * Empowerment in SN Practice * Evidence Based Practice *
Health Promotion and Education * The Group Process * School Nurse Visibility *

Week 1, 1/25/10-1/29/10:

Meeting the educational needs of students in middle school and high school; alternative education; adolescent behavior and impact on health and learning; age appropriate teaching and learning; adolescent growth and development; teacher stress and coping; special education at the secondary level; school nurses in the leadership role.

Week 2, 2/1/10-2/5/10:

School nursing at the secondary level: Coordinated school health programs, community and family involvement; standards of practice in school nursing; theory based practice; nursing standardized protocols; understanding adolescent behavioral and health issues; empowerment in school nursing; functions and management of the health office.

Week 3, 2/8/10-2/12/10:

Adolescent preventive services, healthy promotion and disease prevention for adolescents through coordinated programs, funding sources, the uninsured adolescent and insurance programs, coordinating a health fair; confidentiality and consent; promoting SN visibility.

Week 4, 2/15/10-2/19/10:

Evidence based practice; framework for teaching health education; the school nurse as health educator; the Group Process; creating and facilitating groups; Comprehensive Health Education Model; self confidence as a presenter; sex education for special learners; giving school board presentations; related standards of practice.

Module Two (Wks. 5, 6, 7, 8) February 22, 2010 to March 19, 2010

The Role of the School Nurse Role in Meeting Adolescent Health Needs * The Young Athlete * Physical Education * Adaptive P.E. * Sports Injuries * Adolescent Nutrition * First Aid * Driver Training * Substance Abuse * Sexually Transmitted Diseases * Teen Pregnancy and Parenting.

Week 5, 2/22/10-2/26/10:

The Bill of Rights for Young Athletes; adolescent activity and fitness; common sports related injuries and emergency first aid; nutrition and weight control issues for athletes; the female athlete; physically challenged athletes; Adaptive P.E.; driver Ed; and role of the school nurse.

Week 6, 3/1/10-3/5/10:

Substance abuse: Drugs, alcohol, smoking and other inhalants; ergogenic substances; factors leading to abuse; assessment and recognition of substance abuse; health promotion and education, prevention and cessation programs; legal codes; role of the school nurse.

Week 7, 3/8/10-3/12/10:

Adolescent risky behavior and sexual activity; prevalence of sexually transmitted diseases; role of the school nurse in health promotion and education related to prevention and communicable disease control, history taking, referral and follow-up; community resources; relevant sections of the CA Education Code sections.

Week 8, 3/15/10-3/19/10:

Pregnant and parenting teens; historical perspective and statistics; impact on teen parents and child; child abuse reporting and sexual behavior; programs and community resources; Education Code and other laws; health promotion and pregnancy prevention role of the school nurse in counseling, referral, and health supervision.

Module Three (Wks. 9, 10, 11, 12) March 22, 2010 to April 23, 2010

Role of School Nurse: Adolescent Mental Health & Behavioral Issues * Suicide * Truancy & School Refusal * Sexual Harassment * Bullying & Violence * School Safety * Racial & Ethnic Issues * Crisis Intervention * SBCs * Community * Politics 101 * Performance Evaluation

Week 9, 3/22/10-3/26/10:

Adolescent mental health and behavioral issues: Psychosocial interviews; psychiatric and emotional problems; anxiety disorders; self injury; eating disorders; Oppositional Defiant Disorder; Schizophrenia; school age and adolescent stress related issues, family and date violence; role of the school nurse.

Spring Recess – Week of March 29 – April 2, 2010

Week 10, 4/5/10-4/9/10:

Adolescent mental health and behavioral issues: Self-punitive behavior, gay and lesbian youth, bullying and bullying prevention, sexual harassment, types and subtypes of depression, suicide and suicide prevention, SCT interventions, role of the school nurse.

Week 11, 4/12/10-4/16/10:

Safe schools: Disaster preparedness; crisis intervention and postvention; emergency action plans; collaboration in school safety; gangs and violence; hate motivated behavior; racial and ethnic issues; anger management; role of a volunteer; role of the school nurse.

Week 12, 4/19/10-4/23/10:

School based health centers; community outreach, collaboration, and partnerships; politics 101 for school nurses; legislative advocacy; defining competency in school nursing; school nurse competency and performance evaluation.

Module Four (Wks. 13, 14, 15) April 26, 2010 to May 14, 2010

Role of the School Nurse in Research * Grant Writing * Publishing * Medi-Cal Billing * TCM * Legal & ethical issues * Student Suspension and Expulsion * Technology in SN * Resource Mapping * Professional Standards Review * Professional Connections & Continued Growth

Week 13, 4/26/10-4/30/10:

The benefits of research in school nursing; applying research in practice; role of the school nurse in research projects; grant writing; and publishing articles and research findings.

Week 14, 5/3/10-5/7/10:

Legal and ethical issues in school nursing; pursuing justice in the courts, minor consent, suspension and expulsion; Targeted Case Management; Medi-Cal Administrative Activities (MAA); LEA billing, enrollment and accountability; resource mapping for health services.

Week 15, 5/10/10-5/14/10:

Reviewing standards of school nursing practice; quality assurance; concept of school nurse community; staff recruitment; professional connections and continued growth; health office design and use of computer technology; revising a philosophy of school nursing.

Important Note: *Selected readings for this course can be found in required texts and in CSUF Madden Library online Journal Articles and Electronic Reserve. To assist students in finding answers to questions quickly, sources are listed following each cluster of questions (journal articles by first author only). It may not be necessary to read through all of the resource material provided to answer a question. When you are satisfied that you gained enough knowledge to answer the question feel free to stop.*

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

MODULE ONE (Wks. 1-4) JANUARY 25, 2010 THROUGH FEBRUARY 19, 2010

Adolescent Health Issues * Promoting Student Success * Coordinated School Health Programs *
Related Standards of Practice * Empowerment in SN Practice * Evidence Based Practice *
Health Promotion and Education * The Group Process * School Nurse Visibility *

Week 1, 1/25/10-1/29/10:

Meeting the educational needs of students in middle school and high school; alternative education; adolescent behavior and impact on health and learning; age appropriate teaching and learning; adolescent growth and development; teacher stress and coping; special education at the secondary level; school nurses in the leadership role.

Note: For Module One, along with responding to Blackboard presentations and researching one question own each week, students also need to complete an Interdisciplinary Paper. See guidelines in N185 Syllabus.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Discuss the goals of education at the secondary level. What are the particular educational issues at the high school level? What alternative programs are available in your area that can make a difference? Include in your discussion adolescent/teen attitudes and behaviors that the school nurse should be aware of when working with these students? (Text: Selekman, pp; 373-379, 943-960, 977-978. Selected Readings: Allers-Korostynski, M.; Gregory, T.; Jin Q. Website: CDE, mid/high school; OCLI – Ed Code 51220.)
2. Summarize the 12 CDE recommendations for middle grades success. What are key elements of academic excellence for middle school students? Discuss concerns the school nurse should have regarding these students and the role of the school nurse as team player at the middle school level. (Text: Selekman, pp. 373-379, 943-960, 977-978. Selected Readings: Posnick-Goodwin, S. CA Educator, March 06. Website: CDE, middle school)

3. Discuss the unintended consequences of social promotion for students and the controversy on both sides of the debate. What are suggested ways to motivate students to want to learn and known interventions that get results? Comment on why it is important for the school nurse to have insight into issues of concern to educators and how the school nurse can partner with educators to promote students success?
(Selected Reading: Posnick-Goodwin, S. CA Educator, June 06. Website: CDE.)
4. Scope and Standards of Practice: Read through Standard 15 and article noted below. Discuss ways the school nurse can function effectively in his/her leadership role. Select ten measurement criteria from Standard 15 and relate them to your understanding of school nursing leadership at the secondary level. Explain reasons for your selections and give examples.
(Text: Selekman, Ch. 4. Selected Readings: Denehy J., 2008. Consider also speaking to an experienced secondary school nurse for more insight.)
5. What types of stress related problems might the teacher encounter at the secondary level. Discuss issues relating to teacher frustration and burnout. What are some things that teachers can do to survive successfully? Consider also, your own vulnerability to burnout. What role can the school nurse play in “helping teachers stay healthy and ready to teach?”
(Text: Selekman, Ch. 45. Selected Readings: Hong, L. K.; Houghton, P.)
6. Discuss the stages of adolescent growth and development and attitudes that lead to risk taking behavior that can impact optimal ability to learn. Include in your discussion four health problems that are the direct result from reckless behavior. What is the role of the school nurse as it relates to the Neuman Systems Model?
(Text: Selekman, Ch. 40 and pp. 377-379, 797-801. Selected Readings: Jin Q. Websites noted below.)
7. Select four acute and/or chronic adolescent gender-specific physical health conditions to discuss that are NOT the result of behavioral or gender choice issues, 2 specific to boys and 2 specific to girls. Discuss student attitude towards their condition and issues regarding responsibility for self-care. Discuss the role of the school nurse and an appropriate theory that could be applied.
(Text: Selekman. Articles/websites of your choice.)
8. Read through the CDE *Health Framework for California Public Schools* relevant to middle school grades. List three appropriate health topics and discuss learner readiness related to subject matter. How could using student focus groups in planning health education programs be useful? Speak with a middle school teacher to gain added insight into effective instructional methods that result in observable behavioral changes. Share your findings.
(Manual: CDE. Selected Readings: Wyatt.)

9. Spend 1.5 hours observing in a secondary SDC (Special Day Class) at the middle or high school level. Observe student/teacher interaction, class behavior, student attitudes, and instructional methods. Comment on class demographics and grade level learning readiness. Interview the teacher about the following: mainstreaming opportunities for these students, self esteem issues, discrimination issues, perceived future student success, available programs following high school. Summarize your findings and comment on the value you place on the experience.
(Prior to observation, review the CDE *Health Framework for CA Public Schools* for insight into relevant grade level learner readiness)

Week 1, Assignment Reference Sources:

Textbooks/other:

California Department of Education. (2003). *Health framework for California public schools: Kindergarten through Grade Twelve*. Sacramento, CA: Author.

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinate school health programs*. New York: Teachers College Press.

National Association of School Nurses. (2005). *School Nursing: Scope & Standards of Practice*. Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Adolescent Health:

Focus Adolescent Services, www.focusas.com

Illinois Caucus for Adolescent Health Ed. – www.icaah.org/

Teen Health Issues – http://dir.yahoo.com/Health/Teen_Health/

Search “Adolescent Health” on-lin

California Department of Education – www.cde.ca.gov

High school requirements – <http://www.cde.ca.gov/ci/gs/hs/hsgrgen.asp>

Middle grades - <http://pubs.cde.ca.gov/tcsii/documentlibrary/hstrycamgschlrefrm.aspx>

Middle sch success - <http://pubs.cde.ca.gov/tcsii/recsforsuccess/recsforsuccessindx.aspx>

Special programs - <http://www.cde.ca.gov/sp/>

Health Framework - <http://www.cde.ca.gov/ls/he/cs/documents/blueprintfinal.pdf>

CSNO, www.csno.org

Nursing theories - <http://nursing.clayton.edu/eichelberger/nursing.htm>

OCLI (Official CA Legislative Information) - www.leginfo.ca.govNASN, www.nasn.org

Selected readings:

Allers-Korostynski, M. (2000). Adult learning center: A unique adventure for a school nurse. *Journal of School Nursing*, 16(2), 50-51.

Denehy, J. (2008). Leadership characteristics. *Journal of School Nursing*, 24(3), 107-109.

Gregory, T. (2001). Fear of success? Ten ways alternative schools pull their punches. *Phi Delta Kappan*, 577-581.

Hong, L. K. (2001). Too many intrusions on instructional time. *Phi Delta Kappan*, 721-714.

Houghton, P. (2001). Finding allies: Sustaining teachers' health and well-being. *Phi Delta Kappan*, 706-711.

Jin, Q., Shi, Q. (2008). A comparison of the number of hours of sleep in high school students who took advanced placement and/or college courses and those who did not. *Journal of School Nursing*, pp. 417-424,

Posnick-Goodwin, S. (March 2006). Still caught in the middle. Burlingame, CA: *California Educator*, pp. 6-15.

Posnick-Goodwin, S. (June 2006). Unintended consequences: Social promotion teachers students not to try. Burlingame, CA: *California Educator*, 6-21.

Wyatt, T. H.; Krauskopf, P. B.; Davidson, R. (2008). Using focus groups for program planning and evaluation, 24(2), 71-77.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module One (Wks. 1-4) January 25, 2010 through February 19, 2010

Week 2, 2/1/10-2/5/10:

School nursing at the secondary level: Coordinated school health programs, community and family involvement; standards of practice in school nursing; theory based practice; nursing standardized protocols; understanding adolescent behavioral and health issues; empowerment in school nursing; functions and management of the health office.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. What should be considered in a coordinated school health program at the middle school or the high school level? Discuss how schools, districts, students, and communities can work together in the establishment of a comprehensive school health program for secondary students.
(Text: Marx & Wooley, Chapters 2, 3, 4. Selekman, Ch. 3. Selected Readings: Romano, J. C.; Wyatt. Website, CDE.)
2. List at least six key action steps schools can take to establish or strengthen a coordinated school health program. Include steps to get district level support, key players, buy in from school staff and community, funding sources, and role of the school nurse. Share an idea for a program you would like to see developed in your school or school district.
(Text: Marx & Wooley, Chapters 2, 3, 4; Selekman, Ch. 3. Selected Readings: Romano, J. C.)
3. Does research substantiate a relationship between coordinated school health programs and student success? Discuss one coordinated program that you would like to see established in your secondary school. Select at least one community agency and another department(s) within your school that you would invite to participate in the program and the role each would play. Is there a relationship between coordinated school health programs and student success?

(Text: Marx & Wooley, Ch. 4; Selekman, Ch. 3. Selected Readings: Praeger, S.; M.; Romano, J. C.)

4. Review the Standards of School Nursing Practice. Which standard specifically addresses program management? Discuss program management as you understand it at the secondary level. Consider interviewing an experienced secondary school nurse for additional insight. Give examples of how you could incorporate each of the measurement criteria in this standard into your secondary school nursing practice.
(Text: Selekman, Ch. 4: NASN publication.)
5. Discuss the importance of theory-based school nursing practice. Review Neuman's Health Systems Model and three other nursing models/theories that the school nurse could successfully use at the secondary level. Summarize the essence of each model or theory. Discuss how each could be used. Give at least one example related to client care for each model/theory.
(Text: Selekman, Ch. 2. Website: Nursing Theories.)
6. Discuss what is involved in the development of a Nursing Standardized Protocol. Using the article noted below as an example, develop two protocols for health conditions at the elementary or secondary level that you can actually use in your own school nursing practice.
(Selected Readings: Awbrey, L.)
7. In order for the school nurse to provide comprehensive care to adolescents he/she must understand the adolescent psychological developmental process. For clarification, develop a table that compares the "early," "middle," and "late" adolescent psychological stages. Comment on importance of personal self-reflection and points to keep in mind when interviewing an adolescent. What should be included in a "HEADDS" interview.
(Text: Selekman, pp. 377-378, 797-798, 943-960, 977-978. Selected Readings: Rice, L. I. See also *Rights of Minors* in Document Sect. N185)
8. Empowerment in nursing? Discuss the historical aspect of empowerment in nursing. Why it is important to look back in order to move forward to understand the importance of empowerment? What are the four theoretical constructs that make up the "Situation Specific Theory of School Nursing Empowerment?" What are some ways that you as a school nurse can become empowered in your own practice?
(Selected Readings: Broussard, L.; Manoilovich, M.)
9. Discuss the general function of the secondary school health office and management role of the school nurse. Include Effective use of time, confidentiality issues, use of equipment and technology, delegation of tasks. What should be included in a safe,

efficient and effective setting for the delivery of school nursing services?
(Text: Selekman, Ch. 43 and pp. 1052-1053. Speak with an experienced secondary school nurse for additional insight.)

Week 2, Assignment Reference Sources:

Textbooks/other:

National School Nurses Organization. (2005). *School Nursing: Scope & standards of practice*.
Author.

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

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Search “Adolescent Health” on-line

California Department of Education – www.cde.ca.gov

High school requirements - <http://www.cde.ca.gov/ci/gs/hs/hsgrgen.asp>

Middle grades - <http://pubs.cde.ca.gov/tcsii/documentlibrary/hstrycamgschlrefrm.aspx>

Middle sch success - <http://pubs.cde.ca.gov/tcsii/recsforsuccess/recsforsuccessindx.aspx>

Special programs - <http://www.cde.ca.gov/sp/>

Health Framework - <http://www.cde.ca.gov/lh/he/cs/documents/blueprintfinal.pdf>

ICLI (Official CA Legislative Information) - www.leginfo.ca.gov

CSNO, www.csno.org

NASN, www.nasn.org

Nursing theories - <http://nursing.clayton.edu/eichelberger/nursing.htm>

OCLI (Official CA Legislative Information) - www.leginfo.ca.govNASN, www.nasn.org

Selected readings:

Broussard, L. (2007). Empowerment in school nursing practice: A grounded theory approach. *Journal of School Nursing*, 23(6), 322-328.

Manoilovich, Milisa. (1/31/07). Power and empowerment in nursing: Looking backward to inform the future. *ANA - The Online Journal of Issues in Nursing*, 12(1). Website: <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/Ta bleofContents/Volume122007/No1Jan07/LookingBackwardtoInformtheFuture.aspx>

Mejdell-Awbrey, L. & Juarez, S. (2003). Developing a nursing protocol for over-the-counter medications in high school. *Journal of School Nursing*, 19(1), 12-15.

Praeger, S., Zimmerman, B. (2009). A correlational study of the relationship between a coordinated school health program and school achievement: A case for school health. *Journal of School Nursing*, 25(6), 453-465.

Rice, L. I. (1996). *Understanding adolescence: The key to effective intervention*. (Includes HEADDs, adolescent history taking). Author, 1-6.

Romano, J. C. (2001). The complicated task of managing school health programs. *Journal of School Nursing*, 17(3), 126-130.

Wyatt, T. H.; Krauskopf, P. B.; Davidson, R. (2008). Using focus groups for program planning and evaluation, 24(2), 71-77.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module One (Wks. 1-4) January 25, 2010 through February 19, 2010

Week 3, 2/8/10-2/12/10:

Adolescent preventive services, healthy promotion and disease prevention for adolescents through coordinated programs, funding sources, the uninsured adolescent and insurance programs, coordinating a health fair; confidentiality and consent; promoting SN visibility.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. In considering the development of school health programs, it is essential that the school nurse have insight into state and federal health dollars for schools. In *No Child Left Behind*, discuss some of the “titles” that address health. Include in your discussion examples of other federal laws that speak to funding certain initiatives, as well as federal and state programs and local resources.
(Text: Selekman, pp. 1035-1040. Website: CDE.)
2. Discuss the concerns and issues related to the uninsured child/adolescent and SCHIP (State Children’s Health Insurance) as a result of Public Law 105-33 (Balanced Budget Act of 1997). What guidelines were developed by the American Academy of Pediatrics for states to ensure access to services? Include in your discussion two programs available to children and families in CA. What role can the school nurse in enrolling children and families in programs?
(Text: Selekman, pp. 1045-1048. Websites: CDE; CDS)
3. List risky behaviors among pre-adolescents and adolescents. From that list develop a meaningful lifestyle behaviors survey that you can realistically use with your own middle school or high school population. Describe the grade level/target population you would ask to complete the survey and why, a teacher you would consider working with, and what you would plan to do with the survey results, i.e., health promotion, program development, other.

(Text: Selekman, Ch. 40. Selected Readings: Van Arsdale, E.; Wilson, L. F. Website: Survey development.)

4. Discuss a program that could be developed to promote a healthy lifestyle among overweight male adolescents on a middle school campus. Read through “Obesity Task Force, 2004,” “Surgeon General’s Call to Action,” and review guidelines for teen nutrition. Relating this effort to Standard 11 (Standards of Practice) and collaboration with other family, community, and other faculty.
(Text: Selekman, Ch. 36 and pp. 354-356. Selected Readings: Hatmaker, G.; Stuart, W. P.; Wilson, L. F. Websites: CDE, and search “adolescent obesity.”)
5. Testicular (spermatic cord) Torsion is a condition that can affect preadolescent and adolescent boys. What would you include in an awareness program for boys at your middle/high school? Talk to a P.E. teacher to get ideas on the best method of sharing this information. Review the CDE Health Framework for grade appropriate subject matter and learner readiness. Develop a teaching outline for a P.E. teacher/coach to use to share this information, include emergency action steps in the event signs/symptoms developed.
(Text: Selekman, p 374-375. Websites: Testicular Torsion, or "Google".)
6. Discuss what is involved in the development of a skin cancer prevention program at the secondary level. What are the seven CDC (Center on Disease Control) guidelines that schools are encouraged to incorporating in their programs? Give highlights of the Sun Wise School Program developed by the EPA (U.S. Environmental Protection Agency) and comment on the pre/posttest results following classroom lessons on sun exposure/protection. Is this something that you would consider developing in schools?
(Text: Selekman, pp. 599-600. Selected Readings: Geller, A; Hatmaker, G. Website: Sun wise School Program, see below.)
7. As a school nurse, you have decided to promote health awareness by planning a health fair for students at your high school or middle school. How will you determine health promotion needs? As fair coordinator, discuss your plans, i.e., when, where, how, objectives, target grade level(s), team players. From information gathered on identified health education needs, what community agencies will you invite to participate? Comment where, how, when the fair will take place and ways you can get students actively involved.
(Text: Selekman, 426-432. Selected Readings: Cooper, L.)
8. Discuss ways that the school nurse can promote his/her own professional image at the middle school/high school level. List “market” steps that could be taken. Interview an experienced school nurse to find out what steps he/she has taken to enhance his/her professional image. List three things you will actually plan to do in your own school nursing practice to make yourself more visible and develop a means by which you could

rate pre/post visibility related to each effort.
(Text: Selekman, Ch. 6. Selected Readings: Brandt, C.)

9. Comment on when to share and not to share confidential information. Discuss methods you use to assure that confidential information is not accessed by others. How do you share confidential information with teachers and what expectations do you have that confidentiality will be maintained. Comment on rights of parents with regard to access to records. Can an 18 year old student demand access to his own records? Where should confidential health information be kept that does not relate to a student's educational experience? Can confidential notes be subpoenaed? If so, by who?
(Text: Selekman: pp. 101-102, 155-156, 166, 259, 278-279, 293-298, Selected Readings: Pohlman, K.; Bergren, M. D. 2 articles. Websites: OCLI, Ed Code sections 49075-49079.

Week 3, Assignment Reference Sources:

Textbooks/other:

- Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.
- National Association of School Nurses. (2005). *School Nursing: Scope & Standards of Practice*. Author.
- Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Adolescent Health:

- Focus Adolescent Services, www.focusas.com
- Illinois Caucus for Adolescent Health Ed. – www.icaah.org/
- Teen Health Issues – http://dir.yahoo.com/Health/Teen_Health/
- Search “Adolescent Health” on-line
- California Department of Education, www.cde.ca.gov
- California DHS, CHDP Gateway www.dhs.ca.gov/pcfh/cms/chdp/chdpgateway.htm
- CSNO, Position Statements/professional publications, www.csno.org
- NASN, Position Statements/professional publications, www.nasn.org
- OCLI (Official CA Legislative Information) - www.leginfo.ca.gov NASN, www.nasn.org

Sun Wise School Program, [http://www.epa.gov/sunwise/Survey development](http://www.epa.gov/sunwise/Survey%20development),

Survey development - <http://www.zoomerang.com/whitepapers/tentips.pdf>

Testicular Torsion - <http://www.emedicine.com/EMERG/topic573.htm>

Testicular Torsion - <http://www.mayoclinic.com/health/testicular-torsion/DS01039>

Selected readings:

Bergren, M. D. (2001). The facts about E-mail. *Journal of School Nursing*, 17(5), 274-277.

Bergren, M. D. (2001). The facts about faxing. *Journal of School Nursing*, 17(4), 210-212.

Brandt, C. (2002). Enhancing school nurse visibility. *Journal of School Nursing*, 18(1), 5-10.

Cooper, L., Eliason, K., True, A. (2004). Combining health promotion classroom lessons with health fair activities. *Journal of School Nursing*, 20(1), 50-53.

Geller, A. Rutsch, L. Kenausis, K., Zhang, Z. (2003). Evaluation of the Sun Wise School Program. *Journal of School Nursing*. 19(2), 93-99.

Hatmaker, G. (2003). Development of a skin cancer prevention program. *Journal of School Nursing*, 19(2), 89-92.

Hatmaker, G. (2005). Boys with eating disorders. *Journal of School Nursing*, 21(6), 329-332.

Kaiser Permanente. (2002). What is testicular torsion? CA: Author,1-1.

Pohlman, K.& Schwab, N. (2001). Consent and release. *Journal of School Nursing*, 17(3), 162-165.

Stuart, W. P., Broome, M. E., Smith, B. A., & Weaver, M. (2005). An integrative review of interventions for adolescent weight loss. *Journal of School Nursing*, 21(2), 77-85.

Wilson, L. F. (2007). Adolescents' attitude about obesity and what they want in obesity prevention programs. *Journal of School Nursing*, 23(4), 229-238.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module One (Wks. 1-4) January 25, 2010 through February 19, 2010

Week 4, 2/15/10-2/19/10:

Evidence based practice; framework for teaching health education; the school nurse as health educator; the Group Process; creating and facilitating groups; Comprehensive Health Education Model; self confidence as a presenter; sex education for special learners; giving school board presentations; related standards of practice.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Discuss the importance of evidenced based practice, EBP guidelines, the process of guideline development, and steps involved. Read through the article by Susan Adams and Ann Marie McCarthy to gain insight how into application in school nursing practice and value of EBP in improving student academic success. Share an area in your own school nursing practice where you think EBP would be of particularly valuable.
(Selected Readings: Adams, S.; Bagby, K.)
2. Discuss Danielson's Framework for Teaching and highlights of each of the four domains involved. List some ways the school nurse can collaborate with families and community to promote buy-in to health education programs? Comment on learner readiness and student responsibility issues when teaching secondary pupils. Is there a difference between students at the middle school level as opposed to high school level?
(Text: Selekman, Ch. 7. Selected Readings: CA Health framework.
3. List health related subject matter that is expected to be taught at the secondary level in CA public schools. Are there mandates on what must be taught? Review NASN Standard 5b and select 5 measurement criteria to discuss that apply to the school nurse role as health educator and give an example of each as it relates to school nursing practice at the secondary level.

(Text: NASN publication – standards. Website: OCLI – Ed Code sections – 51200-51203, 51260, 51262, 51890, 51934, 51937-51939.)

4. Read through readings on “Group Process” List key points that you will want to keep in mind when you facilitate your own small group(s). After reviewing the CDE Health Framework for learner readiness and subject matter appropriateness, decide on the type of group you would like to facilitate and a topic for secondary students. Create a problem statement relevant to the group/topic and a brief outline of subject matter that you could follow as a guide in facilitating the group.
(Selected Readings: Nichols, F. CSNO. Websites: Group Process.)
5. Read through CSUF, “Creating & Facilitating Groups,” in your selected readings. Comment on key points from the reading that you will want to keep in mind when facilitating a group yourself. Decide on a health/behavioral issue relevant to a population of pupils at the secondary level and one that would lend itself to a small group discussion. How you would go about discretely identifying and bringing together these pupils to participate in that group? Discuss ways you would organize the first meeting and some important facilitator behaviors you would use with your group.
(Selected Readings: CSUF; CSNO; Nichols, F.)
6. What should be included in a CHEM (Comprehensive Health Education Model) for a staff wellness program? Explain how you would apply CHEM to an employee wellness program. Outline a health promotion interest survey that you could develop for use with a faculty/staff in planning a program.
(Text: Marx & Wooley, Ch. 10. Selected Readings: Galemore, C. A-2 articles.)
7. Some people are uncomfortable giving presentations to groups and fellow professionals? You have been asked to speak at a faculty meeting about health education issues at your high school. You will want to appear self-confident, poised, and knowledgeable. What are the key components of an effective presentation and what steps will you take to be prepared? Developing a PowerPoint, etc.
(Selected Readings: Knight-Barfield, M. Websites: Giving presentations.)
8. You are planning to teach sex education to a group of middle school students in a SDC (Special Day Class). How will you determine age/grade level appropriateness? Review the CDE Health Framework for California Public Schools for insight into learner readiness considering your special population. Develop a lesson plan you could actually use at your own school site by following the format in Selekmán (p. 152). Elaborate on teaching methods, materials, learning outcomes evaluation.
(Text: Selekmán, pp. 139-153, 373-379, 953-956. CDE, Health Framework. Other materials of your choice.)

9. You have been asked to present at a school board meeting regarding the role of the school nurse. What are the key points that you will plan to cover? Make it specific to your own school district. Consider including student health/staff issues, budgeting issues, statistics, etc. of particular concern. Create an outline you could use to develop a PowerPoint. Discuss ways you will prepare for the presentation to make a professional impression. (Text: Selekman, Ch. 6. Selected Readings: Knight-Barfield, M. Websites: Giving presentations.)

Week 4, Assignment Reference Sources:

Textbooks/other:

California Department of Education. (2003). *Health framework for California public schools: Kindergarten through Grade Twelve*. Sacramento, CA: Author.

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

National Association of School Nurses. (2005). *School Nursing: Scope & Standards of Practice*. Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Department of Education, www.cde.ca.gov

CSNO position Statements, www.csno.org

Giving effective presentations - <http://www.garreynolds.com/Presentation/prep.html>;

Group process - <http://www.uark.edu/depts/aeedhp/courses/aged4003/group-process.html>

Group process - <http://www.agpa.org/guidelines/groupprocess.html>

ICLI (Official California Legislative Information), www.leginf.ca.gov

Selected readings:

Adams, S. & McCarthy, A. M. (2007). Evidence-based practice guidelines and school nursing. *Journal of School Nursing*, 23(3), 128-136.

- Bagby, K. & Adams, S. (2007). Evidence based practice guideline: Increasing physical activity in schools – kindergarten through 8th grade. *Journal of School Nursing*, 23(3), 137-143.
- California School Nurses Organization (CSNO). (1996). *Ten characteristics of a great team*. Author, 1-1.
- California State University Fresno (CSUF). (1996). *Creating & facilitating group*. CSUF, 1-16.
- Galemore, C. (2000). Worksite wellness in the school letting. *Journal of School Nursing*, 16(2), 42-48.
- Galemore, C. (2000). Initiation of a school employee wellness program: Applying the comprehensive health education model. *Journal of School Nursing*, 16(3), 39-46.
- Knight-Barfield. M. (1996). *Giving effective presentations*. Author, 1-3 (See outline N185 Document section).
- Nichols, F. & Edwards, M. (1998). Are your group process skills up to par? *Nursing and Health Care*, 9(4), 205-208.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

MODULE TWO (Wks. 5-8) FEBRUARY 22, 2010 THROUGH MARCH 19, 2010

The Young Athlete * Sports Injuries * Emergency First Aid * Nutrition for Athletes * cy * Teen Parenting * Related Ed. Codes

Week 5, 2/22/10-2/26/10:

The Bill of Rights for Young Athletes; adolescent activity and fitness; common sports related injuries and emergency first aid; nutrition and weight control issues for athletes; the female athlete; physically challenged athletes; Adaptive P.E.; driver training; related codes and role of the school nurse.

Note: For Module Two, along with questions, students are also need to complete a book report or a research paper. See guidelines in N185 Syllabus.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Discuss benefits of sports participation for children and adolescents. Comment on the “Bill of Rights for Young Athletes.” What are some ways that physical education/P.E. activity could be integrated into a coordinated school health program? Review Ed. Code sections 33352, 51222 and 51223, comment on findings.
(Text: Selekman, pp. 47-53, 566-568; (Text: Marx & Wooley, Ch. 6. Selected Readings: Miller, B.; Gabbard, C.; Illuzzi, S. Website: OCLI, Ed. Code.)
2. It is September. Jeff, a 10th grader, wants to play football. His mother has refused to take him for a physical exam because she states that he had one last year. She is, however, interested in purchasing insurance in case of injury. Review and comment on sections of Ed Code relating to medical insurance, physical exams, and parent refusal to consent (CEC 49451). Discuss some key points regarding to what should be included in a sports physical. What will be the nurse's conclusions and what recommendations will he/she

make to the mother?

(Text: Selekman, p. 568. Website: OCLI.)

3. Select three sports with specific health issues/injury associated with each. Briefly describe each sport and the risk involved. What are some key things related to each of these activities that the school nurse would emphasize in a classroom presentation on health promotion to young athletes? Comment on some general ways the school nurse can work with the P.E. department to promote health and prevent injuries.
(Text: Selekman, Ch. 24. Websites noted below.)
4. Bob, a 9th grade student has Juvenile Rheumatoid Arthritis. The school nurse receives a note from his physician, "Place in Adaptive P.E." What initial steps will the school nurse take? Who qualifies? Does Adaptive P.E. fall under Special Ed. services? Is an IEP meeting needed? If so, with whom? Summarize CCR Title 5, 3051.5 "Adaptive P.E." Consider discussion process with the school psychologist or IEP team leader.
(Text: Selekman: pp. 191-194, 309-319, 629, 634-644. Website: CCR)
5. Briefly describe five common injuries that occur in P.E./sports at the secondary level and the emergency first aid steps you would take for each. Comment on referral and follow-up process. What emergency guidelines have been put in place at your school sites in the event of your absence when a serious injury occurs? Read and summarize findings related to Ed. Code section 51241, Exemption from P.E. What guidelines are used in your school district for providing students with P.E. Excuses?
(Text: Selekman, Ch. 24. Selected Readings: Your choice. Websites below.)
6. Discuss health issues related to female athlete triad. What can be done to prevent these conditions or lessen their severity? Discuss growth and development and nutritional requirements for females between the ages of 14 and 18 involved in moderate activities. What changes need to be made in nutritional intake for female athletes? What are some specific sports that may lead to female athlete triad? Include in your discussion the role of the school nurse in working with coaches to prevent or lessen the chances of these conditions.
(Text: Selekman, pp. 353-355, 571-573, 577. Selected Readings: Cotugna, N. DeLaTorre, D. Websites noted below.)
7. Discuss the pros and cons related to nutritional supplements and performance-enhancing drugs. List and discuss over the counter dietary supplements that athletes may use. Are these nutritional supplements regulated by the Food and Drug Administration? Comment on use of anabolic steroids and ephedra and their serious side effect. Should athletes who consume a regular diet consisting of a variety of foods have adequate energy to participate competitively in sports? What are some issues related to nutritional intake

timing and sports participation that need to be taken into consideration?
(Text: Selekman, pp. 568-574. Selected Readings: Rosenfield, C. Website: Performance enhancing drugs.)

8. Discuss nutritional requirements for athletes? What types of foods are most beneficial in providing energy and duration? What are the dos and don'ts with regard to fluid intake? Include in your discussion issues related to weight control and the consequences of sudden extreme weight loss and issue related to forced weight gain.
(Text: Selekman, pp. 351-356. Selected Readings: Cotugna, N. LaValle, A. Websites noted below.)
9. Bill, a 15 yr. 6 mo. old 10th grade RSP student is pressing his mother to let him take driver training. He has a history of absence seizures, but there has been no known seizure activity for the past two years. His last medical report on file is six month old. His mother has come to you for advice. Summarize the following codes sections related to participation in driver training ("Lapses of consciousness;" and "handicapped pupils"). What advise will the school nurse offer this mother? Does your school district offer drivers education? If so, at what grade level?
(Text: Selekman: p. 887. Website: OCLI: H & SC (Health & Safety Code) 103900, CEC (CA Ed. Code) 41306, VC (Vehicle Code) 12806, CEC 41308.)

Week 5, Assignment Reference Sources:

Textbooks/other:

Marx, E., Wooley, S.F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs*. New York: Teachers College Press.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Laws, www.leginfo.ca.gov

California Department of Education, codes, www.cde.ca.gov , "CA School Health Connection,"

P.E. & Activities, mandates, appropriate practice, P.E. Framework for CA Schools.

CCR (California Code of Regulations), <http://ccr.oal.ca.gov>, click on CA Code of Reg., Title 5,
type in number only, click on "Search."

CSNO position Statements, www.csno.org

National Athletic Trainers Association – www.nata.org

National Youth Sports Safety Foundation, www.nyssf.org

OCLI (Official CA Legislative Information, www.leginfo.ca.gov

Performance enhancing drugs - <http://www.cnn.com/HEALTH/library/SM/00045.html>

Selected readings:

Cotugna, N., Vickery, C., & McBee, S. (2005). Sports nutrition for young athletes. *Journal of School Nursing*, 21(6), 323-328.

De La Torre, D. & Snell, B. J. (2005). Use of the preparticipation physical exam in screening for the female athlete triad among high school athletes. *Journal of School Nursing*, 21(6), 340-345.

Gabbard, C. (2001). The need for quality physical education. *Journal of School Nursing*, 17(2), 73-75.

Illuzzi, S & Cinelli, B. (2000). A coordinated school health program approach to adolescent obesity. *Journal of School Nursing*, 16(1), 12-19.

Rosenfield, C. (2005). The use of ergogenic agents in high school athletes. *Journal of School Nursing*, 21(6), 333-339.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module Two (Wks. 5-8) February 22, 2010 through March 19, 2010

Week 6, 3/1/10-3/5/10:

Substance abuse: Drugs, alcohol, smoking and other inhalants; ergogenic substances; factors leading to abuse; assessment and recognition of substance abuse; health promotion and education, prevention and cessation programs; legal codes; role of the school nurse.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Discuss trends and statistics related to tobacco use among adolescents. Review the CDE website for insight into funding sources for programs and comment on your findings. Include in your discussion the role of local government and schools in tobacco prevention education (see sections of codes). Which grades are targeted for substance abuse prevention in your schools? Does the school nurse play a role?
(Text: Selekman, pp. 946-948. State codes: H & SC 11605, 11800-11802, 104350, 104355, 104370; CEC 51260, 51261, 51269. (Text: Selekman, pp. 946-948. Selected Readings: Stoltz, A. Websites: Amer. Lung Assoc.; OCLI for codes.)
2. Discuss the elements of a successful prevention or cessation tobacco education program. Develop a survey that would help you determine the percentage of students who smoke and those interested in a cessation program at one of your schools? How would you distribute the survey and going about the task of bringing a group of interested students together? Where and When?
(Text: Selekman, pp. 946-948. Selected Readings: Fritz, D. J.; Heimann, K.; Mahoney, M. C.; Young, J. Website: American Lung Assoc.)
3. Select and discuss three illegal street drugs that you are aware are used in your area. Include risk factors and particulars about each drug, i.e., addictive qualities, signs and

symptoms of use. What is your school district doing to prevent substance abuse? What grade levels are targeted? Discuss your role as a school nurse in health education/promotion, counseling, and referral? Summarize key aspects of the following sections of CA codes regarding substance abuse prevention – CEC 51260, 51261, 51269, 60110; H & SC 11998.

(Text: Selekman, pp. 948-952. Selected Readings: Dychkowski, L.; Young, C. L. Websites: National Institute on Drug Abuse; OCLI for codes.)

4. Take an opportunity to review the substance abuse curriculum at a secondary school and speak with a teacher who is responsible for teaching it to find out his/her view of the effectiveness of the program. What are some key elements of a successful drug prevention program? On what does substance abuse prevention education need to be based in order to be effective? Read through the following sections of codes and briefly summarize key aspects: CEC (CA Ed. Code) 51203, 51260-69, 60040-41, 60110-15; H & SC (Health & Safety Code) 11998-98.
(Selected Readings: Dychkowski, L; Miller, B.; Young, C. L. Website: OCLI for codes.)
5. Discuss “club/party/designer drugs” their origin, method of use, type of expected reaction for the participant, and adverse side effects. Research the following drugs - MDMA, GHB, Ketamine, Rohypnol, LSD. Discuss the signs of each that the school nurse would look for if a student is sent to the health office for evaluation. What assessment steps will the school nurse take? Develop an assessment tool that you could actually use related to assessment. What should be the school nurse’s attitude toward the student? What steps should be taken with regard to referral and reporting?
(Text: Selekman, pp. 949-951. Website: National Institute on Drug Abuse.)
6. Discuss reasons why adolescents drink. What percentage of 8th graders and seniors who report having drank alcohol? If possible, talk to a teacher at the secondary level who teaches substance abuse prevention and read through “Too Smart to Start” education materials at the “Substance Abuse and Mental Health Services Administration” website. What is involved in an effective prevention or early intervention program? What are some health promotion steps the school nurse can take to discourage use of alcohol? List at least one referral agency in your area and one support group where teens can get help for alcohol abuse.
(Text: Selekman, pp. 944-946. Websites: OCLI for codes - CEC 51203, 51260-69, 60040-41, 60110-15. H & SC 11998-98; NACOA; SAMHSA.
7. Discuss the use of inhaled substances among children and adolescents. Include in your discussion types of inhalants, their effect, signs and symptoms, and health hazards. Who are the most frequent abusers? Discuss the role of the school nurse in assessing and counseling students suspected of abuse. What are some recommendations that can be made to parents?

(Text: Selekman, p. 949. Selected Readings: B. Miller; Cook, K. R. Websites: National Institute on Drug Abuse, others below.)

8. The campus supervisor brings Raymond, a 10th grade student into your office to be assessed for possible substance abuse. He slouches into a chair. On questioning, his answers are slurred and he seems to be somewhat disoriented. As a school nurse, describe the assessment steps you will take? What should your attitude be towards Raymond? What type of questions will you ask? Who will you contact and how will you describe the results of your assessment? What is your district policy regarding suspected substance abuse?

(Text: Selekman, pp. 948-952. Selected Readings: Miller, B. (2001); Young, C. L.)

9. Roger is a senior who tells you that he "loves to party." He commented that he was up all night! You note that he still seems full of energy. You suspect use of a 'party drug.' Such as Ecstasy. In planning a presentation for a Social Living class (other) on use of such drugs, what will you include in your presentation? Develop an outline that you could actually use, include thought provoking points and/or factual examples you could make in your presentation to discourage use of these drugs.

(Text: Selekman, pp. 949-952. Selected Readings: Sutherland, J. A. Websites: National Institute on Drug Abuse.)

Week 6, Assignment Reference Sources:

Textbooks/other:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Adolescent issues, www.focusas.com

Al-anon, Alateen, www.al-anon-alateen.org

Amer. Lung Assoc. (smoking), <http://www.lungusa.org/>

California Department of Education, www.cde.ca.gov

California Laws, www.leginfo.ca.gov

Columbia Pres. Med Center (alcoholism), <http://cpmcnet.columbia.edu>

Department of Health Services, www.dhs.ca.gov (Facts/statistics on substance abuse, other)

Mayo Clinic (drug addiction), www.mayoclinic.com

National Association for Children of Alcoholics, <http://www.nacoa.net/>

National Council on Alcoholism, www.ncadd.org

National Institute on Drug Abuse, (substances, treatment, prevention and grants, etc,

<http://www.nida.nih.gov/drugpages.html>

OCLI (Official CA Legislative Information, www.leginfo.ca.gov

SAMHSA (alcohol abuse), <http://prevention.samhsa.gov/>

Teens with problems, www.teenswithproblems.com

U.S. Dept. of Health and Human Services, Alcohol Alert, www.niaaa.nih.gov

Selected readings:

California School Nurses Organization. (2000). Resources (helpful resources). *Risky Business*. Author, 39-40.

Cook, K. R. (1999). Assessment of potential inhalant use by students. *Journal of School Nursing*, 15(5), 20-23.

Dychkowski, L. (March 2001). Preventing kids from using and abusing drugs: How are we doing? *School Nurse News*, 44-47.

Fritz, D. J.; Wider, L. C.; Hardin, S. B.; Horrocks, M. (2008). Program strategies for adolescent smoking cessation. *Journal of School Nursing*, 24(1), 21-17.

Heimann, K. J. (2000). A school-based intervention program to prevent adolescent smoking. *Journal of School Nursing*, 16(4), 22-27.

Mahoney, M. C. (2000). Evaluation of a youth tobacco education program: Student, teacher, and presenter perspectives. *Journal of School Nursing*, 16(4), 16-21.

Miller, B. (2001). *Drugs and Effects* (chart) and *Assessment for possible impairment* (tool). Author, 1-3.

Rosenfield, C. (2005). The use of ergogenic agents in high school athletes. *Journal of School Nursing*, 21(6), 333-339.

Stoltz, A. D., Sanders, B. D. (2000). Cigar and marijuana use: Their relationship in teens. *Journal of School Nursing*, 16(4), 28-35.

Sutherland, J. A. (February 26, 2001). Craving to rave: The agony of Ecstasy abuse. NurseWeek, 19-20.

Young, J. (2001). *Tobacco and nicotine* (facts for a newsletter). CSUF, 2-5.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module Two (Wks. 5-8) February 22, 2010 through March 19, 2010

Week 7, 3/8/10-3/12/10:

Adolescent risky behavior and sexual activity; prevalence of sexually transmitted diseases; role of the school nurse in health promotion and education related to prevention and communicable disease control, history taking, referral and follow-up; community resources; relevant sections of the CA Education Code sections.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Discuss adolescent risky behaviors and attitudes toward sexual activity. Discuss counseling methods you would take in talking to an adolescent how you would handle counseling with and assessing a Include in your discussion the role of the school nurse in counseling and history taking?
(Text: Selekman, 373-376, 816, 953-956. Selected Readings: Muscari, M.)
2. Contact your local public health department and request statistics on the STDs. What are the three most common sexually transmitted diseases in your area? What percentage of persons infected are adolescents. Give an overview of each these three STDs, success in treatment, and role of the school nurse. List the agencies/clinics in your area where you can refer students with suspected STDs.
(Text: Selekman, Ch. 42. Selected Readings: Tarr, B. Websites: Focus Adolescent Services; others.)
3. Sexually transmitted diseases: Review STDs in Selekman, Ch. 42. Then read through the outline by Betty Tarr in your Selected Readings and answer the questions at the end of the outline. Comment on issues related to confidentiality and the role of school nurse in counseling, referral, and follow-up.

4. What are some important considerations in planning and conducting HIV/AIDS health education the high school level? Reference the CA Health Framework for learning capability related to lifestyle changes. Read through the CA Ed Codes sections specific to teaching comprehensive sex education and HIV/AIDS in schools and summarize key points relevant to each.
(Text: Selekman, Ch. 42. Selected Readings: Facente, A. C. Websites: CDE; CDC & Prevention; OCLI - Ed. Code sections 51933, 51934, 51037-51939; other websites noted below as appropriate.)
5. What should be included in a sex education program for middle school students? List subject matter that you would incorporate in a teaching outline for a group of these students. Reference the CA Health Framework regarding appropriateness of this subject matter for this age group and learner readiness. Review CA Ed Code sections 51933, 51934, 51037-51939 and reference relevant sections. Tie in the role of the school nurse as educator and relate the role to measurement criteria in Standard of Practice 5B.
(Text: Henderson & Champlin, Ch. 8; Selekman, pp. Ch. 7, Ch 40 - 952-956; CA Health Framework. Selected Readings: Marick, J.; Puentes, W. J. Website: OCLI; Sex Education.)
6. Select three of the following conditions to discuss. Include in your discussion the causative organism, course of the disease if untreated, signs, symptoms, treatment, and prognosis. In summary, comment on role of the school nurse regarding confidentiality, history taking, and name at least one referral agency in your area. Topic choices: Pelvic Inflammatory Disease, Syphilis, Trichomonas Vaginalis, Genital Herpes, Hepatitis B, Human Papillomavirus.
(Text: Selekman, Ch. 42; Selected Reading: Muscari, M. E.)
7. Sue has come to the school nurse with a complaint of burning on urination and a vaginal discharge. What might the school nurse suspect? What might you suspect? Discuss counseling techniques the school nurse might use, confidentiality issues, and the elements of an adolescent sexual history. Can you allow her to leave campus without parent consent in order to seek medical attention during school hours? Name two agencies/clinics in your area that you could suggest to her for evaluation and treatment.
(Selected Readings: Selekman, Ch. 42; Selected Reading: Muscari M. E. Websites: OCLI, CEC 460110.1 and CEC 49602.)
8. Bernice, a 9th grade student had a excused absence recorded from the previous week. As the school nurse, you are aware that the absence was due to the fact that she sought medical attention for a confidential matter. Her mother confronts you and demands to know about the excused absence and what right you had in excusing her during school hours. The mother also demands to see her daughter's health card. Does the mother have a right to see the health record? How will you respond to this mother's demands? Where

should the nurse keep confidential notes unrelated to the student's school experience? (Websites: OCLI – Ed Code sections 46010.1, 49602, 49069.)

9. Steve, age 17, comes into the health office to show the school nurse a rash that he has noticed on the palms of his hands and soles of his feet. He is also complaining of a sore throat. In the course of history taking, the school nurse finds out that Steve is sexually active and has had several girl friends over the past few months. What might the school nurse suspect? Discuss symptoms and prognosis. What steps will the school nurse take? Address issues of confidentiality. Can school nurses in your district excuse students from school during school hours to seek medical attention? Check district policy and Ed. Code. (Text: Selekman, Ch. 42; Selected Readings: Muscari, M. E. Websites: OCLI, Ed Code 46010.1.)

Week 7, Assignment Reference Sources:

Textbooks/other:

California Dept. of Ed. (2004). Health Framework for California Schools: Kindergarten through Grade 12. Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

AIDS Treatment Information Center, www.hivatis.org

California Codes – www.leginfo.ca.gov

California Department of Education Codes, www.cde.ca.gov

HIV/STD Prevention, programs, grant info.

Center on Disease Control and Prevention (Sexually transmitted diseases), www.cdc.gov;

<http://www.cdc.gov/std/dstdp/>

Department of Health Services, www.dhs.ca.gov (Facts/Statistics, Pregnancy, C.D.)

Focus Adolescent Services, www.focusas.com

California laws/Ed Code 51933, 51934, 51937-51939 (Sex Ed.) - leginfo.ca.gov

OCLI (Official CA Legislative Information, www.leginfo.ca.gov)

Sex Education - <http://www.avert.org/sexedu.htm>

Selected readings:

Facente, A. C. (2001). Adolescents and HIV: Knowledge, behaviors, influences, and risk perceptions. *Journal of School Nursing*, 17(4), 198-203.

Marick, J. (2002). HIV/AIDS peer education: A rural health project. *Journal of School Nursing*, 18(1), 41-47.

Miller, B. (2001). *Ed. code relating to education in the following areas: Family life education, parenting classes, and AIDS prevention instruction*. Author, 11-17.

Muscari, M. E. (Sept.-Oct. 1987). Obtaining the adolescent sexual history. *Pediatric Nursing*, 13(5).

Puentes, W. J. (2003). Using peer health education to enhance family life education. *Journal of School Nursing*, 19(6), 313-318.

Tarr, Betty. (2001). *Sexually transmitted diseases and adolescents*. Author, 1-6.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module Two (Wks. 5-8) February 22, 2010 through March 19, 2010

Week 8, 3/15/10-3/19/10:

Pregnant and parenting teens; historical perspective and statistics; impact on teen parents and child; child abuse reporting and sexual behavior; programs and community resources; Education Code and other laws; health promotion and pregnancy prevention role of the school nurse in counseling, referral, and health supervision.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Briefly discuss the historical perspective on teen pregnancy and current statistics on pregnancy and abortion. What attitudes exist about pregnancy among teens and who are the girls who become pregnant? Include in your discussion the role of the school nurse in counseling, confidentiality, referral and follow-up.
(Text: Selekman, Ch. 41. Selected Readings: B. Miller, 2001. Websites below.)
2. Discuss school nurse responsibility related of counseling, history taking, confidentiality, and support of the pregnant teen. Include in your discussion the impact of pregnancy and responsibilities of young fathers. Select 4 things to elaborate on that the school nurse will want to incorporate into health teaching related to responsibility for self and the unborn child? What steps will the school nurse take in the area of monitoring and follow-up?
(Text: Selekman, Ch. 41; Selected Readings: Casserly, K.; Human Services System; Smithbattle, L. Websites: WIC and others below.)
3. Discuss use of Title IX as it relates to protecting the rights of pregnant and parenting teens. What is Title IX and when was it established? List important rights of these students. What legal protection do these students have under the CA Education Code? Review the pertinent sections of the Education Code (8910-894) and summarize your findings. What programs and services are available to students in your area/district?

(Text: Selekman, Ch. 41. Websites: OCLI for Ed. Code; Center for Assessment and Policy Development.)

4. Visit a Cal-Learn Program in your area, or another similar program, to gain insight into services and incentives offered to pregnant and parenting teens to keep them in school and learning. Interview an administrator or social worker in the program to gain specific insight into effectiveness of the program in your own area. What is the ethnic breakdown of the population served by the agency? Is there evidence of a positive relationship between the program and school attendance? How is the agency funded?
(Text: Selekman, Ch. 41. Selected Readings: Diaz, D.; FUSD; Human Services System. Websites below.)
5. Discuss pregnancy trends among Hispanic teens, or another prevalent ethnic group in your community that tend to have a greater number of teen pregnancies. Include attitudes, values, beliefs, and family planning practices, or lack of, that may contribute to this trend. Are there some health education approaches that might work to impact this trend?
(Textbooks: Selekman, Ch 41. Selected Readings: Jones, M. E.; Hoyt, H. H. Websites below.)
6. Maria, a 14-year old 9th grade student, comes to your office very distraught. She has not had a menstrual period for two months. She asks for permission to leave campus to go for a pregnancy test. Discuss the role of the school nurse, i.e., attitude, counseling, confidentiality, concerns, reporting. How and where will you refer her in your area? Read through sections 46010.1 and 49602 of Ed. Code and district related district policy. Note the word “may” in section 46010.1. How is this handled in your district? Based on your findings, will you allow her to leave campus during school hours?
(Selected Readings: Miller, B. 2001; Bb N185 Document Section. Websites: OCLI.)
7. Martha, a 15 year-old 10th grade student, learns that she is 4 months pregnant. She shares with you that her “boy friend” is 22. She is terrified that her parents will find out. She informs you that she wants to have an abortion. Is this sexual activity between these partners reportable in CA? How will you counsel this student? What about confidentiality issues? What does H & SC 123450 have to say about un-emancipated minors and abortion? Contact a Family Planning Clinic in your area regarding their policy related to abortions on under age teens. Share your findings.
(Text: Selekman, pp. 971-972. Websites: Alan Guttmacher Institute; OCLI for sections of Ed Code. N185 Document section for reportable sexual activity with/between minors.)
8. As a school nurse, you have been invited to facilitate a discussion with a small group of first/second trimester prenatal students to talk about taking responsibility for their health and the health of their unborn child during pregnancy. You want this to be an enjoyable learning experience for the girls. What are the issues of primary concern? Decide on the

subject matter that you will cover and develop a simple teaching outline you could actually use to facilitate a group discussion. Include motivation of school attendance. What are some key points related to success in facilitating a small group – See CSUF. (Text: Selekman, Ch. 41. Selected Readings: Dormity, C. A.; CSUF; FUSD. Website: Cal-Learn.)

9. You plan to facilitate a discussion with four 3rd trimester prenatal students at your high school. What are your concerns for this group? What subject matter will you plan to cover? Develop a simple teaching outline that you could use for a small group discussion. Include information on services and resources for new mothers and babies in your district and community? How will you help facilitate the mother's return to school? Comment on key points in facilitating a small group.
(Selected Readings: Casserly, K.; CSUF; FUSD. Websites: Cal-Learn; WIC. Other resources: Your choice regarding subject matter related to outline.)

Week 8, Assignment Reference Sources:

Textbooks/other:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Alan Guttmacher Institute, teen pregnancy, <http://www.guttmacher.org/>

California Department of Education, www.cde.ca.gov "CA School Health Connection,"

Teen pregnancy prevention, programs, CA stats, grant information

California Laws, www.leginfo.ca.gov (Laws)

Cal-Learn program, <http://www.cdss.ca.gov/cdssweb/PG84.htm>

Cal-Learn, <http://www.dss.cahwnet.gov/CDSSWEB/PG84.htm>

Center for Assess & Policy Development, <http://www.capd.org/pubfiles/pub-1999-10-01.pdf>

Child Trends, www.childtrends.org

CSNO, (Position statements, Child Abuse, Condoms in schools, other), www.csno.org

Fatherhood and Family Law: Myths/Facts, www.gate.net/~liz/liz/017.htm

Focus Adolescent Services, www.focusas.com

National Campaign to prevent teen pregnancy, www.teenpregnancy.org

OCLI (Official CA Legislative Information, www.leginfo.ca.gov

Rights of Pregnant and Parenting Teens, <http://www.capd.org/pubfiles/pub-1999-10-01.pdf>

WIC, <http://www.fns.usda.gov/wic/aboutwic/>; <http://www.fns.usda.gov/wic/>

Go on line and search “Teen Pregnancy” and “STD”

Selected readings:

Casserly, K. R. (2001). Adolescent parenting: Relationship to school attendance and achievement. *Journal of School Nursing*, 17(6), 329-335.

California State University Fresno. (1996). *Creating & facilitating a group*. CSUF, 1-16.
(See Week 4 – Electronic Reserve)

Diaz, D. Office of Women, Infants & Children (2001) *WIC works wonders* (Supplemental food program). Author, 1-4.

Dorminy, C. (1995). The hope game: Helping ourselves through prenatal education. *Journal of School Health*, 65(7), 268-271.

Fresno Unified School District. (1998). *Prenatal health course of study and PACE (Parent and Child Education)*. Author, 1-5. (Program examples)

Hoyt, H. H. (2002). School-based teen pregnancy prevention programs: A review of the literature. *Journal of School Nursing*, 18(1), 11-17.

Jones, M. E., Kubelka, S. & Bond, M. (2001). Acculturation status, birth outcomes, and family planning compliance among Hispanic teens. *Journal of School Nursing*, 17(2), 83-89.

Miller, B. (2000). CA codes - rights of minors, pregnant/parenting teens and infant programs, child abuse and neglect – 1998. *California Law*, www.leginfo.ca.gov.

Miller, B. (2001). *Teen pregnancy and services, sexual abuse, Ed.Code*. (Outline includes child abuse reporting related to sexual activity. Author, 1-10.

Smithbattle, L.(2006). Helping teen mothers succeed. *Journal of School Nursing*, 22(3), 130-135.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

MODULE THREE (Wks. 9-12) MARCH 22, 2010 THROUGH APRIL 23, 2010

Week 9, 3/22/10-3/26/10:

Adolescent mental health and behavioral issues: Psychosocial interviews; psychiatric and emotional problems; anxiety disorders; self injury; eating disorders; Oppositional Defiant Disorder; Schizophrenia; school age and adolescent stress related issues, family and date violence; role of the school nurse.

Note: No additional assignments due with module Three.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Manuel, a 9th grade student, comes to your health office and slumps into a chair. He seems withdrawn and depressed. He tells you that he isn't feeling well and wants to go home. Discuss role of the school nurse in counseling and the assessment steps you will take to determine the seriousness of the situation. What are some signs of depression you might expect to see in an adolescent? Include issues related to confidentiality, referral and follow-up.
(Text: Selekman, pp. 790-795, 790-792; Berman, A.L., Ch. 4. Websites below.)
2. Robert, a 10th grade student, comes into the health office. He appears anxious, fearful and short of breath. He has a history of poor attendance and has failing grades in several classes. Discuss assessment and counseling steps the school nurse will use in determining Robert's problem. Discuss your suspicions along with signs and symptoms of a possible disorder, its treatment, and prognosis. With whom will the school nurse consult at the school site? What mental health services are available in your community to help adolescents?
(Text: Selekman, pp. 781-789. Websites noted below.)
3. Matthew, a 7th grade student, has been sent to the principal's office for acting out in class. The principal has asked the school nurse to "take a look at him." His teacher has reported

that Matthew acts angry a great deal of the time and has recently threatened other students. The school nurse is frequently asked to assess a child for behavior problems. To do this, the school nurse must look at various sources before deciding on a plan of action. Keeping the nursing process in mind, discuss how the school nurse will carry out an behavioral assessment and management in school.
(Text: Selekman, Ch. 38.)

4. A student confides in you, the school nurse, she is worried about Jenny, a 9th grade friend, whom she has observed vomiting in the restroom following lunch on several occasions. Briefly discuss your suspicions regarding Jenny's problem. What tactful steps will you take in contacting Jenny and establishing rapport? What signs and symptoms will you look for during assessment? How would you respond to Jenny's request that you 'not tell' her parents? Discuss issues related to follow-up and referral.
(Text: Selekman, pp. 353-356, 798-801. Selected Readings: Meyer T.; White, J. Website below and others.)
5. Define "anxiety." What is involved in a "generalized anxiety disorder? Include in your discussion the following three anxiety disorders seen in children and adolescents – Panic Disorder, Obsessive-Compulsive Disorder, and Posttraumatic Stress Disorder. Cover possible causes, management, treatment and prognosis. What is the role of the school nurse in helping these students? What programs are available in your school district and/or your community for helping children and adolescents with mental health disorders?
(Text: Selekman, Ch 34. Websites noted below.)
6. Describe Oppositional Defiant Disorder (ODD). Include in your discussion etiology, characteristics, concerns, management and treatment. Summarize a typical case scenario of ODD as it relates to adolescent behavior. What is the difference between the behavior of a child/adolescent with ADHD and one with ODD? Can these conditions be seen together? Comment on the role of the school nurse and referral sources in your district and community.
(Text: Selekman, pp. 705-708, 797-798; Website noted below.)
7. Discuss possible early warning signs and symptoms of Schizophrenia in children, adolescents and young adults. Visit the websites noted below to uncover more in depth information about the disorder, prognosis, medications used in treatment, related problems. What programs/treatment centers are available in your community?
(Text: Selekman, pp. 804-805. Websites noted below and others.)
8. Discuss issues related to self injury. Definition, who injures themselves, types of injury, assessment approaches, interventions, development of a Self-Injury Protocol and the various avenues that lead to different solutions. Comment on some steps to habitual self

injury. Is it an addiction? Is there a relationship to suicide? List some helpful hints to overcoming the problem.

(Text: Selekman, pp. 935-936. Selected Readings: Shapiro, S. Website: Self Injury.)

9. Summarize at least five key points in family and dating violence. What is the Cycle of Violence? What are some things that the school nurse should be looking for when date violence is suspected? Why is it frequently difficult to help victims of abuse? Discuss the role of the school nurse in attempting to help these victims.

(Text: Henderson & Champin, Ch. 13; Selekman, 934-935. Selected Readings: Marjaree Mason Center. Website noted below.)

Week 9, Assignment Reference Sources:

Textbooks/other:

Berman, A.L., Jobes, D. A., Silverman, M. M. (2007). *Adolescent suicide*. 2nd ed. American Psychological Association.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

American Academy of Child & Adolescent Psychiatry, www.aacap.org/publications

Anxiety/Panic Disorders, www.adaa.org/ www.nami.org/helpline/anxiety.htm

Bipolar Disorder, <http://www.nimh.nih.gov/health/topics/bipolar-disorder/index.shtml>

Eating disorders - Mayo Clinic ("E" for eating disorders) <http://www.mayoclinic.com/>

Mood Disorders, www.mhsource.com/

Oppositional Defiant Disorder,

<http://www.mayoclinic.com/health/oppositional-defiant-disorder/DS00630>

National Alliance for the Mentally Ill, www.nami.org

Schizophrenia (Medline Plus) <http://www.nlm.nih.gov/medlineplus/schizophrenia.html>

Schizophrenia, Mayo Clinic ("S" for schizophrenia) <http://www.mayoclinic.com/>

Self Injury, http://www.helpguide.org/mental/self_injury.htm

Self Injury, <http://www.focusas.com/SelfInjury.html>

Truancy, *Manual to Combat*, www.ed.gov/pubs/Truancy/

Selected Readings:

Marjaree Mason Center. (1999). *The cycle of violence*. Author, 1-7.

Meyer, T. A. & Gast, J. (2008). The effects of peer influence on disordered eating behavior. *Journal of School Nursing*, 24(1), 36-42.

Shapiro, S. (2008). Addressing self injury. *Journal of School Nursing*, 24(3), 124-130.

White, J. (2000). Eating disorders in elementary and middle school children: Risk factors early detection, and prevention. *Journal of School Nursing*, 16(2), 28-35.

N185, SEMINAR IN SCHOOL NURSING

WEEKLY QUESTIONS BOOKLET

Module Three (/Wks. 9-12) March 22, 2010 through April 23, 2010

Week 10, 4/5/10-4/9/10:

Adolescent mental health and behavioral issues: Self-punitive behavior, gay and lesbian youth, bullying and bullying prevention, sexual harassment, types and subtypes of depression, suicide and suicide prevention, SCT interventions, role of the school nurse.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. A teacher sends Barbara, a 7th grader, to be checked by the school nurse after noticing several small bald spots on her head. Her teacher is concerned about a “contagious” disease. While in the office, Barbara sits quietly twisting a strand of hair between her fingers. After ruling out contagious disease, the school nurse concludes Barbara appears to have what condition? Is this considered self-mutilation? Discuss causes and characteristics of those who inflict self-injury, feelings aroused in those who try to help, and possible attitudes of classmates. What steps will the school nurse take to help Barbara?
(Text: Selekman, pp. 601, 935-936. Selected Readings: Suyemoto, K. L.: Websites noted below.)
2. Bill, a 9th grade student, appears distressed and confidentially tells the school nurse that classmates have been teasing him and accusing him of being “gay.” The student asks, “Why are they saying that?” “How would I know if I am gay?” What should the attitude of school nurse be and how can the nurse help Bill? Discuss issues related to the “coming-out process,” coping methods for dealing with confusion/loneliness, and possible health related problems.
(Text: Selekman, 339, 1125-1128. Selected Readings: Bakker, L. J. Website noted below.)

3. Some children/adolescents are the victims of bullying and violence, while others are the perpetrators. Discuss several characteristics of each and strategies for change. What initial steps might the school nurse take or recommend to administrators to bring school wide awareness to the problem? Review the CDE sample school district policy on bullying. Does your school district have a policy in place? If so, comment. If bullying is left unchecked, comment on possible consequences.
(Text: Selekman, pp. 337, 784, 920-926. Selected Readings: Cavendish, R. Websites: “Don’t Laugh at Me;” CDE, Bullying Prevention.)

4. Define sexual harassment. Read through the “Sexual Harassment” section of the National Criminal Justice Reference Service at the website noted below. What piece of legislation protects the rights of the individual against sexual harassment? Read through the results of the survey in Bryant’s article written in 1993 and the incidence of sexual harassment in schools today according to Cavendish and summarize your findings. Discuss ways the school nurse prevent sexual harassment among students.
(Text: Selekman, pp. 1103-1104. Selected Readings: Cavendish, R.; Website: CDE; others below.)

5. Describe types and subtypes of depression. What are some signs and symptoms of a depressive disorder? Include in your discussion masked depression, genetic and family influences, and concepts of and approaches to depression. Is depression different in those identified with mental retardation compared with the regular population? Discuss the role of the school nurse in screening, counseling and referral.
(Text: Selekman, pp. 791-795. Selected Readings: Ailey, S.; Lyon, D. E.; Oria, J. Websites as noted.)

6. Assessing suicide risk and intervention strategies. Discuss assessment techniques the school nurse might use to determine suicide risk. If you as a school nurse were actually confronted with a situation in which you believed that a student was at risk for possible suicide, what intervention steps would you take? Who would you involve at the school site and/or in the community? Comment on parent contact and issues related to confidentiality and follow-up.
(Text: Berman, A.L. Ch 4; Selekman, pp. 794-795. Website: Suicide prevention.)

7. Discuss suicide prevention programs and the SCT (School Crisis Team) as an essential component of effective intervention in the school setting. Include purpose, intent, and steps involved in developing a program and/or plan. Who would you invite to be on a SCT team and what specific tasks would be assigned to each member? If your school district or school has a plan in place, comment on that plan.
(Text: Berman, A.L., pp. 312-326. Selekman, Ch. 10 and pp. 794-795. Website: Suicide prevention) Note: Selekman Ch. 10 relates to emergency response teams in general. This same concept can be used for preparing for all types of emergencies, including suicide prevention and post-vention.

8. Discuss post-vention tasks relating to a completed suicide. Include survivor support memorial services, continuing follow-up, and the role of the SCT and school nurse. In the unfortunate event that a student at your school or faculty member should take his/her life, discuss the specific steps that you and/or the head of the SCT will take to initiate comfort to students and staff and bring some closure to the situation. Regarding paper trail, what types of forms should be on hand for triaging and follow-up on affected pupils and staff? (Text: Berman, A.L.; Selekman, Ch. 10 (see note above) and pp. 794-795.)

9. Who are the populations/individuals who most often choose suicide as a means of escape? Discussion factors, influences, and stressors related to each population that tends to lead to serious depression and/or inability to cope. Include in your discussion preventive and intervention steps, or treatments that may be effective in curtail this behavior. Incorporate the school nurse role as appropriate. (Text: Selekman, pp. 91, 128-133, 159-167)

Assignment Reference Sources:

Textbooks/other:

Berman, A.L., Jobes, D. A., Silverman, M. M. (2007). *Adolescent suicide*. 2nd ed. American Psychological Association.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

CA Attorney General's Office, Laws – Crime and Violence, www.ns.net/caag/cvpc/

CDE, Bullying Prevention, www.cde.ca.gov/spbranch/safety (Safe Schools and Violence Prevention, click on “Bullying Prevention.”)

CDE, sample policy on bullying prevention, <http://www.cde.ca.gov/lss/se/samplepolicy.asp>

Bullying, “Don’t Laugh at Me” (children who are teased/rejected by peers), <http://www.youtube.com/watch?v=h>

Gay and Lesbian Youth – safe schools, <http://members.tripod.com/~twood/guide.html>

Mayo Clinic, (type in subject matter of interest), www.mayohealth.org

Mood Disorders, www.mhsource.com/ (click on topic or write in topic of interest)

Prevention Researcher (Subscriptions, adolescent health issues), www.TPRonline.org

Self Injury, <http://www.focusas.com/SelfInjury.html>

Self Injury, http://www.helpguide.org/mental/self_injury.htm

Sexual Harassment, www.ncjrs.org/txtfiles/harass.txt

Suicide Prevention Guidelines - <http://www.doe.virginia.gov/VDOE/Instruction/prevention.pdf>

Trichotillomania (pulling out own hair, lashes), <http://www.trichotillomania.co.uk/>

U.S. Food and Drug Administration, Bio-terrorism, <http://vm.cfsan.fda.gov/>

“Google” search for other topics.

Selected Readings:

- Ailey, S. (2000). Screening adolescents with mental retardation for depression. *Journal of School Nursing*, 16(1), 6-11.
- Bakker, L. J. & Cavender, A. (2003). Promoting culturally competent care for gay youth. *Journal of School Nursing*, 19(2), 65-72.
- Cavendish, R. (2001). Bullying and sexual harassment in the school setting. *Journal of School Nursing*, 17(1), 25-31.
- Oria, J., Cureton, V. Y., Canham, D. (2001). Evaluation of the effectiveness of a youth leadership class in the prevention of depression in adolescents. *Journal of School Nursing*, 17(4), 204-209.
- Suyemoto, K. L. (November 2000). Self-mutilation. *The Prevention Researcher*, 7(4), 1-11.
- Thomas, S. P. (2003). Identifying and intervening with girls at risk for violence. *Journal of School Nursing*, 19(3), 130-139.

N185, SEMINAR IN SCHOOL NURSING

ASSIGNMENT BOOKLET

Module Three (/Wks. 9-12) March 22, 2010 through April 23, 2010

Week 11, 4/12/10-4/16/10:

Safe schools: Disaster preparedness; crisis intervention and postvention; emergency action plans; collaboration in school safety; gangs and violence; hate motivated behavior; racial and ethnic issues; anger management; role of a volunteer; role of the school nurse.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Read through the document “Crisis Response Box: Partnering for Safe Schools” found at the CDE website. Comment on the purpose of the crises response box; include several key suggestions for creating a “box;” interdisciplinary team approach to planning; chain of command; importance of communication in crisis situations, i.e., SOS and ICS. What role should the school nurse play in planning and participation? Read through the codes listed and make a general statement regarding contents. Comment on emergency response plan in place in your school(s) or district.
(Text: Selekman, Ch. 10. Website: “Crisis Response Box;” Health and Safety Code, 101030, 120220, 120230, 120175; Government Code 8558, 8630.)
2. Read through the *School Emergency Procedures Ready Reference* (example of a district plan) in your selected readings. Briefly describe the three types of emergency crisis at school and who/what should be involved at each level. Discuss situations where the school nurse might be directly involved with an incident and his/her role.
(Text: Selekman, Ch. 10 and pp. 495-499. Selected Readings: Anderson School District; D.; Wolf, T.)
3. As a school nurse, you have been asked to participate in the development of an emergency action plan specific to your role as the “health professional” at your school site. What steps will you take? Consider needed supplies and location(s) on your campus; medication issues; paper trail/forms, students with special needs, etc. Who will you report to/communicate with. Keep in mind usual communication methods may not be available.

(Text: Selekman, Ch. 10. Selected Readings: Bobo, N.; Calarco, C.; Scholenfeldt, M. - Overview, Pre-vention resources; Wolf, T. Website: CDE, "Crisis Response Box.")

4. An explosion has occurred in the cafeteria while students are eating lunch. Another designated crisis team member has called 911. There is no fire, but some students have been cut by flying glass and/or were knocked off out of their chairs and are now sitting or lying on the floor. As a school nurse, you arrive on the scene. What is one of the first things you need to do? Include in your discussion emergency steps, first aid supplies, crisis intervention forms, contacts, follow-up.
(Text: Selekman, Ch. 10, pp. 495-499. Selected Readings: Anderson School District Five; Schoenfeldt, M. Your knowledge of First Aid/CPR.)
5. Discuss issues relating to the aftermath of a crisis incident, i.e., timeframe for healing, recall triggers, assumptions people make. What action steps and types of support should be in place for students and staff, i.e., agencies, support groups. Discuss comfort and support that can be extended to families of students.
(Text: Selekman, Ch. 10. Selected Readings: Schoenfeldt, M. (Post-vention, Resources).)
6. Discuss the value of collaboration as it relates to school safety and violence prevention. Review list of suggestions at the CDE website on ways students, parents, community residents, and law enforcement personnel can contribute to the reduction of violence, select at least three from each of these categories to elaborate on with application to your own school(s) and community. What prevention steps have been taken in your school and community? What can you do as a school nurse to contribute to the reduction of violence?
(Text: Selekman, pp. 220-233 and Ch. 39. Selected Readings: Strawhacker, M. T. Thomas, S. P. Website: CDE, Improving collaboration on school safety.)
7. Discuss some of the issues that school nurses faced following the Katrina and Rita hurricanes that devastated Louisiana. What role would you plan in the event of a natural disaster in your area? As a school nurse? As a Red Cross volunteer? What qualifies a school as a temporary shelter? Contacting your local Red Cross for insight. Survey your health office and develop a list of the things you will need to take with you in the event of an evacuation. Keep it for future reference. Is your Crisis Intervention Team ready?
(Text: Selekman, Ch. 10. Selected Readings: Broussard, L. Website: Red Cross)
8. Through interviews and observation, what is the likelihood of an outbreak of violence in your school(s)? What is being done in your schools to curb violence such as programs, safety measures, zero tolerance for unacceptable behavior, improved communications, tolerance for differences. List early warning signs of violence. Who are those students

who might likely perpetrate violent acts? How do you defuse an angry parent who comes into your office?

(Text: Selekman, pp. 220-233 and Ch. 39. Selected Readings: Lamb, J.M.; Posnick-Goodwin, S.; Strawhacker, M. T. Websites noted below.)

9. Discuss the issues relating to gang activity, i.e., why adolescents join gangs, evidence of gang activity in schools in your area, what schools can do to discourage gang activities. What do you see as the role of the school nurse?

(Text: Selekman, pp. 926-928. Selected Readings: GWC, Inc.; Quiroz, H. C.; Tulare Office of Education; Wiesenthal Center Report. Websites noted below.)

Assignment Reference Sources:

Textbooks/other:

Henderson, A. & Champlin, S. (1998). *Promoting Teen Health*. Thousand Oaks, CA: Sage Publications.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

CDE Safe Schools, www.cde.ca.gov/sp/brnrcy/safety

Crisis Response Box, <http://www.cde.ca.gov/ls/ss/cp/documents/crisisrespbox.pdf>

Collaboration on school safety issues, <http://www.cde.ca.gov/LS/ss/vp/sscollab.asp>

Gang Education and Training Resource Guide, www.gwcinc.com/gguide.htm

National Juvenile Justice Action Plan, www.ojjdp.ncjrs.org/action/sec6.htm

National Youth Violence Prevention Resource Center, www.safeyouth.org

National Youth Gang Center, www.iir.com/nygc/

Red Cross, <http://www.redcross.org>

Selected Readings:

- Anderson School District Five. (1995). *School emergency procedures ready reference*. Author, Anderson, South Carolina, 45-66.
- Bobo, N., Hallenbeck, P., Robinson, J. (2003). Recommended minimal emergency equipment and resources for schools: National consensus group report. *Journal of School Nursing*, 19(3), 150-156.
- Broussard, L; Myers, R.; & Meauz, J. (2008). The impact of hurricanes Katrina and Rita on Louisiana school nurses. *Journal of School Nursing*, 24(2), 78-82.
- Calarco, C. (1999). Crisis team development. *Journal of school nursing*, 15(1), 46-48.
- GWC, Inc. (1998). *Gang Assessment tool*. Author, 1-2.
- Lamb, J. M., Puskar, K. R., Sereika, S., Patterson, K., Kaufmann, J. A. (2003). Anger assessment rural high school students. *Journal of School Nursing*, 19(1), 30-40.
- Posnick-Goodwin, S. (February 1999). School is still a safe haven. *California Educator*, 6-17.
- Quiroz, H. C. (1999). *How every school staff member can stop and help prevent put downs, slurs and name calling at their school*. Author, 1-4.
- Schoenfeldt, M. & Associates. (1999). *School crisis response teams: Lessening the Aftermath*. Author, Overview, 1-1 thru 1-4; Pre-vention, 2-1 thru 2-14; Inter-vention, 3-6, 5-18, 5-32 thru 5-33, Post-vention, 4-1 thru 4-4; Resources, 5-19 thru 5-25, 5-39 thru 5-54.
- Strawhacker, M. T. (2002). School violence: An overview. *Journal of School Nursing*, 18(2), 68-72.
- Thomas, S. P. (2003). Identifying and intervening with girls at risk for violence. *Journal of School Nursing*, 19(3), 130-139.
- Tulare Office of Education. (1993). *What being a gang banger has done for me*. Author, 1-1.
- Wiesenthal Center Report. (1998). Gang logos. *The New Lexicon of Hate*., Author, 1-1.
- Wolf, Theresa. (2002). Bring your First Aid kit: An unannounced mock drill. *Journal of School Nursing*, 18(3), 174-17.

N185, SEMINAR IN SCHOOL NURSING

ASSIGNMENT BOOKLET

Module Three (Wks. 9-12) March 22, 2010 through April 23, 2010

Week 12, 4/19/10-4/23/10:

School based health centers; community outreach, collaboration, and partnerships; politics 101 for school nurses; legislative advocacy; defining competency in school nursing; school nurse competency and performance evaluation.

Note: For Module Four, along with questions, students are also need to complete a Legislative paper. See Assignment guidelines in N185 Syllabus (p. 15).

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. School based health center or clinics. Discuss justification, goals, services, management issues, value to community/ students, funding, and issues related to opposition in some cases. If possible, visit a school based clinic for observation purposes and speak with a NP to gain a local perspective.
(Text: Selekman, pp. 421-422. Selected Readings: Berti, L. C.; Lessard, J. A.; Strunk, J. A. Websites: "School Based Clinics.")
2. You are interested in pursuing the creation of a school based clinic at one of your school sites. Where will you begin? Who will you speak with? Who/what might stand in your way? How do you get buy-in from partners, community? Who would you target with a survey and how would you distribute it? List steps you would take to begin the process. Comment on overcoming identified obstacles.
(Text: Selekman, pp. 421-435. Selected Readings: Berti, L.; Lessard, J. A.; Swartwout, K. Websites: "School Based Clinics.")
3. Discuss the range of services that could be offered in a school health center to sexually active, pregnant and/or parenting teens. In the article by Swartwout, what important steps

were taken before condoms could be made available to students? What were the guidelines for distribution? What are your views on condoms availability at school? Where would your community draw the line on services offered in a school-based clinic? Include in your discussion important steps that need to be taken before determining types of services that could be provided in a clinic in your school district.
(Text: Selekman, pp. 421-435. Selected Readings: Strunk, J. A.; Swarwout, K.)

4. Discuss the importance of community partnerships for the establishment of a meaningful health promotion program related to promoting a healthy lifestyle. Decide on a program you could realistically promote and some strategies you might use to get school and community buy-in. List potential collaborators you will contact and give reasons. Develop a survey to ascertain interest and decide on your target recipients. To whom will you distributed (i.e., teachers, students, community groups, agencies, businesses)?
(Text: Selekman, Ch. 19.)
5. Politics 101. Summarize the process whereby ideas become laws and where it begins and ends. List the Senate/Assembly Standing Committees that a bill must pass through to become a law. Discuss reasons why school nurses need to be politically active and ways in they can be involved. Visit websites listed below and/or telephone book to find out who the legislators are who currently represent you in your district at the local, state, and national levels, share your findings.
(Selected Readings: Gustafson, L.; Isaac, B. C. Website: CSNO – Advocacy Handbook)
6. Plan to visit the office of a state legislator or congressman/woman who represents your district. Discuss the subject matter that you would like to share related to a recent bill, the importance of the school nurse role, concerns about health services for school age children, etc. Include in your discussion preparation for the visit, key points you will want to remember, and what member of your group will share what (Note: It is suggested that 2 or 3 colleagues plan to make the visit together.). Give several reasons why it is important for constituents to keep their representatives informed?
(Selected Readings: Gustafson, L. Website: CSNO, Advocacy Handbook.)
7. Discuss the significant role that the CSNO (California School Nurses Organization) plays as an advocate for school age children and school nurses in the political arena. What is the role of the CSNO Political Action Committee? Review the bills found at the CSNO website and select one to comment on which CSNO is following and why, i.e., supports, approves, or is watching. Read through the CSNO website section on federal legislation of interest to school nurses and comment on your findings in this area. What value do you place on legislative involvement on the part of your professional organizations?
(Websites: CSNO – Legislation.)
8. Define competency with regard to school nurses. What serves as a framework for professional expectations? List standards of performance that describe a competent level of behavior in that professional role. What are essential outcomes of formal education for

school nursing? Do you feel that you have reached a comfortable entry level of professional competence?
(Text: Selekman, pp. 91-92, 102-107, 238-239, 1094. NASN publication. Selected Readings: Bobo, N.; Miller, B.; Pulcini, J.; Tustin, J.)

9. Rate your own professional performance for personal use by Using the evaluation tools in the articles by Marcontel, M. and Tustin, J. and others (2002), *Professional Development and Appraisal System for School Nurses*, OR the Tulare County *Certificated School Nurse Performance Evaluation* form and questionnaire that follows, “*How effective is your school nurse.*” (Electronic Reserve). Share your self critique, i.e, areas of strength and areas where you will strive to improve. What type of evaluation tool is used in your district to evaluate school nurse practice?
(Text: Selekman, p. 89, 1093-1100. Selected Readings: Marcontel, M.; Pulcini, J.; Tulare County Office of Education; Tustin, J.)

Assignment References Sources:

Textbooks/other:

National Association of School Nurses. (2005). *School Nursing: Scope and Standards of Practice*. Silver Springs, MD: Author.

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Department of Education, Safe Schools, www.cde.ca.gov/spbranch/safety

California Legislative issues, www.leginfo.ca.gov

Bill Information

Your Legislature: Committee membership; your district representative.

Legislative Calendar

California Department of Education, California Law, www.cde.ca.gov

California Constitution

Bill Information

Federal Legislation

Legislative Districts/Regions

California School Nurses Organization, www.csno.org

Legislative bill status pertinent to school nursing

Locating your state representatives

Bill Alerts

California School Nurses Organization Advocacy Handbook, www.csno.org/?page=Legislation

National Association of School Nurses, www.nasn.org, "Search"

Legislative updates

School Based Clinics

<http://www.henryfordhealth.org/body.cfm?id=47741> (Detroit Michigan)

<http://www.dshs.state.tx.us/schoolhealth/healctr.shtm> (Texas)

<http://www.health.state.ny.us/nysdoh/school/skprogram.htm> (New York)

Selected Readings:

Berti, L. C., zylbert, S., & Roinitzky L. (Sept./Oct. 2001). Comparison of health status of children using a school-based health center for comprehensive care. *Journal of Pediatric Health Care*, 244-250.

Bobo, N. (2002). Excellence in school nursing practice: Developing a national perspective on school nurse competencies. *Journal of School Nursing*, 18(5), 277-285.

Lessard, J. A. & Knox, R. (2000). Telehealth in a rural school-based health center. *Journal of School Nursing*, 16(2), 38-41.

Marcontel, M., Tustin, J., Canham, G., Berridge, J., Braden, D., & Storke, T. (2002). Professional development and appraisal system for school nurses. *Journal of School Nursing*, 18(3), 229-239. (Madden Library School Nursing Journal Archives).

Miller, B. (2001). *School nurse practice evaluation/professional development*. Author, 1-1.

Pulcini, J., Couillard, M., Harrigan, J., & Mole, D. (2002). Personnal and professional characteristics of exemplary school nurses. *Journal of School Nursing*, 18(1), 33-40.

Strunk, J. A. (2008). The effect of school-based health clinic on teenage pregnancy and parenting outcomes: An integrated literature review, *Journal of School Nursing*, 24(1), 13-20.

Swartwout, K. & Russell, J. (1999). A successful strategy: Garnering community support for contraceptives services to be provided in a school-based health center. *Journal of School Nursing*, 15(5), 36-38.

Tulare County Office of Education. (1997). *Certificated school nurse (employee) performance evaluation*. Author, 1-6.

Tustin, J., Canhan, G., Berridge, J., Braden, D. & Starke, T. (2002). Professional development and appraisal system for school nurses. *Journal of School Nursing*, 18(4), 229-236. (Madden Library School Nursing Journal Archives).

N185, SEMINAR IN SCHOOL NURSING

ASSIGNMENT BOOKLET

MODULE FOUR (Wks. 13-15) APRIL 26, 2010 to MAY 14, 2010

Week 13, 4/26/10-4/30/10:

Benefits of research in school nursing; applying research in practice; role of the school nurse in research projects; grant writing; and publishing articles and research findings.

Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.

Questions:

1. Define research and discuss its value in relation to school nursing. Outline the research process, i.e., the problem, literature review, hypothesis formulation, methodology, etc. List four types of study design and briefly explain each. Think of an area in your school nursing practice where you see a research need and share your thoughts. What type of a study design that would be most suitable for this study?
(Text: Selekman, Ch. 8. Selected Readings: Frame, K.; Hootman, J.; Ryberg, J. W.)
2. Read through the outline, *Nursing Research-Mini-Review*, and article critique assignment by Dr. Nuttall, as well as the article, *Comparison of Health Status of Children Using a School-based Health Center for Comprehensive Care* by Linda C. Berti & others in the Selected Readings. Summarize the subject matter in the article and answer the questions following the outline.
(Text: Selekman, Ch. 8. Selected Reading: Berti, L. C. & Nuttall, P.)
3. Review the following two research articles by Larson, K. and Walsh, A. (and others). Summarize the subject matter of each and compare the studies, i.e., process, design, measurement, data collection, analysis, and findings. Have you been involved in a research study or research project, if so, share your experience, type of study and outcome. (Selekman, Ch. 8. Selected readings: Larson, K.; Walsh, A.)

4. Read through Susan Praeger's "Framework for Teaching" in the Selekman text. Briefly explain key aspects of each of the four domains with regard to teaching effectiveness. Explain your own approach to teaching at the high school level as opposed to the elementary level (4th-6th grade). What are the significant differences? Review the CA Health Framework regarding subject matter appropriateness and learner readiness for these two groups, share your findings. Comment on your personal comfort level in teaching at the secondary level. Are there areas you will want to work on improving? (Text: Selekman, Ch. 7.)
5. Identify problem/subject matter for a possible research project at your high school. Will you consider a "simple discrete project" or a "collaborative research endeavor" (Selekman, p. 170). What steps will you take in initiating your research, i.e., identify the problem, literature review, hypothesis formulation, methodology, etc. Include in your discussion research strategies and issues related to buy-in by others, possible funding sources. List things that you will need to address in a checklist for planning clinical research.
(Text: Selekman, Ch. 8 and 44. Website: NASN)
6. Finding funding sources for new programs or a research project. Funding sources must be found before new programs or research can be started. Think of a program or research project relevant to adolescent health that you could pursue. Consider contacting a 'grant writer' in your school district for a list of possible grant writing opportunities or do a website search. Locate at least two funding sources that could be realistically pursued. Share your findings.
(Text: Selekman, Ch. 44. Websites: Noted below, plus do a search.)
7. Knowledge of grant writing is important in order to obtain funding to develop new programs and/or pursue a research project. Discuss the important aspects of successful grant writing. Include the dos and don'ts. If you have been involved in grant writing in the past share your experience, the role you played and outcome. If not, consider interviewing someone with experience to gain valuable insight.
(Text: Selekman, 1036-1042. Selected Readings: Miller, B. (a-b); Palmer, P.; Richards, D.)
8. What is a Healthy Start Grant? When, how and why were they established? Summarize the goals, key components, and governance structure. What types of grants are available through Healthy Start? Who is invited to apply? Are you aware of a program at a school in your district that has been established as a result of funding through Healthy Start? If so, consider visiting the project and/or interview someone involved to gain insight into the program, ongoing funding issues, etc.
(Selected Readings: CDE; Miller, B (a-b). Websites: CDE.) Note: State budget constraints may have impact on grant opportunities.

9. Writing an article or publishing a study gets the information to the population with whom you want to share. Summarize the insight you have gained with regard to organizing a manuscript, writing for publication and publishing opportunities. If you have attempted to publish an article or study before, share your experience.
(Selected Readings: Johnson, S. H.; Lynch, B. S. Website: Writing for Nursing Times; others based on search. Skim through Journal of School Nursing to note of the writing style, format, etc.)

Assignment Reference Sources:

Textbooks/other:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

Grant opportunities, grant writing tips, sample proposals, fundraisers
<http://www.schoolgrants.org>

Grants for Nursing, www.lib.msu.edu/harris23/grants/3nursing.htm

Grants, Robert Wood Johnson Foundation,
<http://www.rwjf.org/applications/solicited/cfp.jsp?ID=20203>

Healthy Start Grants, CDE, www.cde.ca.gov, “Healthy Start” and www.healthystart.net/

National Association of School Nurses (Research), <http://www.nasn.org/Default.aspx?tabid=370>

National Institute of Nursing Research, Diversity Programs and Resources,
www.nih.gov/ninr/r_diversity.html

U. S. Department of Education, grants and contracts information,
www.nih.gov/ninr/r_diversity.html

Writing for Nursing Times: Author Guidelines,
<http://www.nursingtimes.net/nursing-times-this-weeks-issue/>

Selected Readings:

- Berti, L. C., Susan Zylbert, & Linda Rolnitzky (September/October 2001). Comparison of health status of children using a school-based health center for comprehensive care. *Journal of Pediatric Health Care*, 244-250. (See Week 12 in Electronic Reserve for article.)
- California Department of Education. (2001). *Healthy Start*. Author, 1-5.
- Frame, K. & Kelly, L. (2003). Reading nursing research: Easy as ABCD. *Journal of School Nursing*, 19(6), 326-329.
- Hootman, Janis. (2002). The importance of research to school nurses and school nursing practice. *Journal of School Nursing*, 18(1), 18-24.
- Johnson, S. H. (1992). Organized manuscript. *Journal of School Nursing*, 8(2), 20-24.
- Larson, K. & Mcquiston, C. (2008). Walking out of one culture into another: Adolescent Latinos. *Journal of School Nursing*, 24(2), 88-94.
- Lynch, B. S. (1990). Writing for publication. *School Nurse*, 28-35.
- Miller, B. (2001 a). *Grant opportunities for school districts*. Author, 1-4.
- Miller, B. (2001 b). *Samples of a funded mini-grant, Healthy Start Grant (p. 1), grant Application*. Various sources, 1-11.
- Nuttall, P. (2001). *Nursing research - mini-review and article critique assignment*. Author, 1-4.
- Palmer, P. (Fall 2000). Mastering the basics of grant writing can increase nurse researchers' chances of being successfully funded. *Minority Nurse*, 36-39.
- Richards, D. (1990). Ten steps to successful grant writing. *JONA*, 20(1), 20-23.
- Ryberg, J. W., keller, T., Hine, B., Christeson, E. (2003). Data speak: Influencing school health policy through research. *Journal of School Nursing*, 19(1), 17-22.
- Walsh, A., Mosley, J., & Winston, J. (2008). The effects of an infant feeding classroom activity on the breast-feeding knowledge and intentions of adolescents. *Journal of School Nursing*, 24(3), 164-169.

N185, SEMINAR IN SCHOOL NURSING

ASSIGNMENT BOOKLET

Module Four (Wks. 13-15) April 26, 2010 to May 14, 2010

Week 14, 5/3/10-5/7/10:

Legal and ethical issues in school nursing; pursuing justice in the courts; minor consent, suspension and expulsion; Targeted Case Management; Medi-Cal Administrative Activities (MAA); LEA billing, enrollment and accountability; resource mapping for health services.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Questions:

1. Read selected readings, Baird, P. J., “Pursuing justice in the courts: Lessons from the experience of one school nurse;” and Gelfman, M. H. C., “School Health Services after Cedar Rapids Independent School District V. Garret F.” Briefly summarize each case. What legal insight have you gained that can be apply to your school nursing practice? (Text: Selekman, Ch. 12. Selected Readings: Baird, P. J.; Gelfman, M. H. C.)
2. Because there are many different laws, federal and state, civil and criminal, and those related to education and health, one law may conflict with another causing difficulty for the school nurse. Discuss issues related to the preemption doctrine. Include in your discussion the conflict in Texas regarding the three conflicting statues. Find out how this is handled in California. Wording of laws also need to be read closely. Is there a conflict between CA Ed code section 46010.1 and a school district policy that states that students are not allowed to leave campus for confidential reasons during school hours? Explain. (Selekman, Ch 12.)
3. Minor consent. At what age and under what circumstances can a minor consent to medical or dental care? Discuss minor consent for mental health services, define what is meant by these services, types of agencies/individuals who can provide these services, age of minor, and requirements that need to be satisfied before service can be provided. Comment on parental involvement in consent for treatment and financial obligation. (Text: Selekman, pp. 101-102. Website: Youth Law; California Law for Family Code, sections 6920-6929. Also see N185, Documents Section “Rights of Minors.”)

4. Suspension and expulsion from school. Give an example of the role that the school nurse can play in suspension/expulsion proceedings? List reasons for suspension and expulsion. Who is responsible for recommending suspension or expulsion? What official body is responsible for expelling a student? What types of disciplinary action can be taken? Comment on the types of alternative programs of study for suspended / expelled students, ADA, and responsibility of districts for maintaining records and reports to whom.
(Website: CA Law, Ed. Code, sections 48900-48927.)
5. What is 'resource mapping'? As the Coordinator of Health Service, you have been asked to determine funding sources to pay for defibrillators for the high schools in your district. Begin by determining cost for equipment and staff in-servicing for X schools. Then, determine potential sources of funding through the development of a funding/resource map. Consider also speaking with a grant writer/district financial planner for additional funding sources.
(Text: Selekman, Ch. 44. Website search.)
6. Discuss Medi-Cal billing as it relates to health services and the role of the school nurse. What qualifying factors allow billing for which population of students? Include in your discussion types of billable services, provider qualifications, specific services that only nurses can provide, supervision requirements for whom, service limitations, treatment services that are billed using 15 minute increments of time. Comment on provider codes, services, limitations and give 3 examples.
(Websites: LEA Provider Manual – Nurse.)
7. Discuss Medi-Cal Administrative Activities (MAA), what it is and how the program helps CA schools. What governmental program does MAA fall under? What county connection must be made before an LEA (Local Educational Agency) can bill for administrative activities? List the activities that are claimable and briefly describe each. How is information gathered for billable activities? If your school district is doing MAA billing, speak to an administrator to find out into which fund reimbursed moneys are received into and for what they are used.
(Selekman, pp. 1043-1044. Websites: See MAA below)
8. Targeted Case Management, another LEA billing option. Discuss what is involved in TCM. Who qualified for services, how and why? Include in your discussion the way in which billing takes place, timeframe for re-evaluation of a plan and service limits. Comment on services codes and give an example. Comment on case manager qualifications and the role.
(Text: Selekman, p. 1045. Website: Dept. of Health Care Services noted below.)

9. For the school nurse manager interested in information related to enrolling as an LEA in order to participate in the Medi-Cal Billing Option. Read through the LEA Provider's Guide at the noted website. Discuss your findings regarding the enrollment process and responsibilities of providers. Include in your discussion a brief summary of your understanding for the need for an annual report and managed care plans and contracts. (Website: Dept. Health Care Services noted below.)

Assignment Reference Sources:

Textbooks/other:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Law, www.leginfo.ca.gov

Dept. Health Care Service, Medi-Cal, <http://www.cde.ca.gov/ls/pf/hs/leamedicalbilling.asp>

LEA Billing – Nurse , <http://www.dhcs.ca.gov/provgovpart/Pages/LEAProviderManual.aspx>

Dept. Health Care Services, www.medi-cal.ca.gov, or (916) 552-9616, Administrative Claiming

MAA Billing - <http://www.teachersforhealthykids.com/maa.htm>

<http://www.leaderservices.com/services/ca/>

<http://www.dhcs.ca.gov/provgovpart/Pages/localgovernment.aspx>

Selected Readings:

Baird, P. J. (2001). Pursuing justice in the courts: Lessons from the experience of one school nurse. *Journal of School Nursing*, 17(4), 218-221.

Gelfman, M. H. C. & Schwab, N. (2000). School health services after Cedar Rapids Independent School District v. Garret F. *Journal of School Nursing*, 16(4), 54-59.

N185, SEMINAR IN SCHOOL NURSING

ASSIGNMENT BOOKLET

Module Four (Wks. 12-15) April 26, 2010 to May 14, 2010

Week 15, 5/10/10-5/14/10:

Reviewing standards of school nursing practice; quality assurance; concept of school nurse community; staff recruitment; professional connections and continued growth; health office design and use of computer technology; revising a philosophy of school nursing.

*Note: For each week, students are to select one question (or clusters of questions) to research and write up on their own from the Weekly Questions Booklet. **Do not select either of the two questions that have previously been selected by presenters for their Blackboard presentations.** Students are responsible for responding to two Blackboard presentations – the scenario/prompt posed by presenters, critiquing each presentation, and participating in discussion to the extent that he/she responds to at least one posting by a fellow student for each presentation.*

Note: *If you are finishing Phase II of the program this semester complete the School Nurse Services Credential **Post Program Knowledge Base Questionnaire** and turn it in with your Module IV packet. Thank you!*

Questions:

1. Comment on the value you place on having national standards of school nursing practice and how those standards strengthen your school role. Review the NASN 'Standards of Professional Performance.' For each of the 10 standards (7-16) share two things that you have incorporated into your school nursing practice or that has benefited you in your practice as a result of your insight into the standards in the past year.
(Text: Selekman, Ch. 4.)
2. Quality assurance is an essential ingredient in evaluating coordinated school health programs. What is the comprehensive role of the school nurse as defined by administrators and others? What infrastructure and support do school nurses need to achieve health, safety, and education outcomes for students?
(Text: Selekman, pp. 91-93, Selected Readings: Newell, S.)
3. What is the concept of “school nurse community?” In the context of community health, how is community defined? What are the four factors that affect the health of a

community? Elaborate on each. Discuss application of the framework and implications to school nursing.

(Selected Readings: Christeson, E. P.)

4. As school health manager you have been asked to participate in recruitment and filling vacant staff positions. Discuss issues related to staff recruitment and ways to attract qualified candidates. How will you go about creating an applicant pool? Include in your discussion the job application and interview process, prudent practices, and federal laws that prohibit job discrimination.
(Text: Selekman, Ch. 46.)
5. Comment on the value you place on staying connected with your professional school nurse organizations. How do these organizations personally benefit you in your school nursing practice? If you haven't done so recently, visit the CSNO and NASN websites to gain insight into the latest topics/information/news flashes. Select two items of interest found at each of these websites on which to elaborate. Comment on the value and/or usefulness of the information to your school nursing practice.
(Websites: CSNO, NASN.)
6. Networking with other school nurses is one of the best ways to stay abreast of what is happening in school nursing. If you are a member of CSNO and you haven't visited "Charlotte's Web" at the CSNO website, it is time that you make that connection. This is your opportunity to continue networking with other school nurses just as you have been doing on Blackboard. To do so, just go to www.csno.org. Once connected, open three email communications and comment on the subject matter of each. What value do you think this connection will have for you your school nursing practice?
(Website: CSNO.)
7. Have fun designing and equipping the ideal secondary health office facility! Comment on staffing needs and a description of a workable floor plan that allows for observation/privacy, counseling, etc. List general categories of key supplies, equipment, and educational materials you will need to function effectively. How does your current facilities compare with your ideal? Consider sharing your ideas with your administrators/principal. Perhaps future funding will make it possible!
(Text: Selekman, Ch. 43. Selected Readings: Suszka-Hildebrandt, S.; Vessey, J.)
8. As members of the education team school nurses need to stay abreast of what is happening in education as well as in school nursing. Take this opportunity to visit the California Department of Education website. Comment on the vision of the CDE. Take time to glean through the different areas at the website, i.e., recent news items, highlights, program offerings relevant to health and school nursing, grant opportunities, and

publications. Select three areas of interest to you and elaborate on your findings.
(Website: CDE.)

9. In the beginning of the semester in Nursing 184 students were asked to write a personal philosophy of school nursing. If your philosophy of the school nursing has changed as a result of experience and knowledge gained since that time, update your philosophy and explain your reasons for the changes. Are you pleased with your decision to enter school nursing and with school nursing as a whole? Are there things you would like to see change? What are some ways that you personally can help make those changes happen? Share your ideas/plans for the future.
(Selekman, Ch. 4, 5, 6.)

Assignment Reference Sources:

Textbooks/Other:

Selekman, J. (2006). *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Co.

Websites:

California Department of Education, www.cde.org

California School Nurses Organization, www.csno.org

National Association of School Nurses, www.nasn.org

Selected readings:

Christeson, Elisabeth. (2003). The health of the school nurse community: A framework. *Journal of School Nursing*, 19(2), 73-80.

Newell, S., Schoenike, S. L., Lisko, E. A. (2003). Quality assurance in school health. *Journal of School Nursing*, 19(3), 157-162.

Suszka-Hildebrandt, S. (2001). Handheld computing: The next technology frontier for school nurses. *Journal of School nursing*, 17(2), 98-102.

Vessey, J. (2002). An evaluation of commercial school health software for use in multi-site research studies. *Journal of School Nursing*, 18(2), 95-101.

Syllabus: NURS 187
School Nurse Practicum II
Fall 2010

Leadership for Diverse Communities
School Nurses Bridging the Gap Between
Optimal Health and a Child's Ability to Learn

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B. Miller-12/09

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(Note: Syllabus page numbers do not correspond with the Program Assessment Document.)

CSUF DEPARTMENT OF NURSING

Course Number: Nursing187
Course Title: School Nurse Practicum II (Secondary)
Units: 3 Units (Total hours - 135)
Semester: Spring Semester only
Delivery: Class participation online through Blackboard/clinical at school sites
Prerequisites: N 180T - Audiometry for School Nurses, Audiometrist's Certificate

NURS 136 - Health Appraisal
NURS 137 - Health Teaching
COUN - 174 or 200
SPED 120, Introduction to Special Education
NURS 184 - Introduction to School Nursing
NURS 185 - Seminar in School Nursing (Prior to or concurrently)

Note: Approval must be obtained from program coordinator to take prerequisites concurrently with core courses or to take equivalent prerequisite courses at another university.

Faculty: Beverly A. Miller, RN, MPA/HS
Office: McLane Hall, Room 288
Office hours: Monday, Wednesday, Friday 12:30-4:30 P.M.
Phone: (559) 278-6252; FAX: (559) 278-1013 or (559) 278-6360
E-mail: bmillers@csufresno.edu

Nancy Busch, RN, MA
Office: McLane Hall, Room 288
Office hours: Thursdays 12:30-4:30 P.M. (by appointment only)
Phone: (Request contact via E-mail: FAX: (559) 278-1013/559- 278-6360
E-mail: nbusch@csufresno.edu (preferred contact)

CSUF: CSU Fresno, Department of Nursing
2345 E. San Ramon Ave. M/S MH 25, Fresno, CA 93740-8031
Phone: (559) 278-2041, FAX: (559) 278-6360

Catalog Course Description:

Secondary level school nursing experience including special education; direct supervision by a credentialed school nurse required; scheduled conferences with preceptor and faculty.
(9 clinical hours/week)

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BMM: 12/09

NURS 187 COURSE OUTLINE, SPRING 2010

Assignment and Due Dates

Tuesday 1/25/10	<i>First day of class for program</i>
Dates	<i>ASSIGNMENTS</i>
Documents Due Monday 2/8/10	Fax (559-278-1013) or mail following documents: • Immediate Supervisor Approval for SN to act as Preceptor (Preceptor Syllabus – doc 1) • Preceptor vitae if not already on file with university (Preceptor Syllabus – doc 2) • Student/Preceptor Contract for spring semester (Preceptor Syllabus – doc 3) Note: University/Agency Agreement MUST be in place before clinical practice can begin!
2/11/10 through 2/14/10	CSNO Conference: Renaissance Hollywood Hotel. Attendance not required! Faculty will plan to meet and network with students and preceptors who attend following CSNO Business Meeting at back of that room.
Mon. 2/15/10	• Student Goals and Learning Objectives sent through Bb Assignment Drop for approval.
Module I Due Monday 2/22/10 (Wks. 1-4)	<u>Module I: Planning and Development of Student Goals and Learning Objectives</u> • Finalized Student Goals and Learning Objectives sent with other Module I work, p.11. • Experienced School Nurse Project Proposal (2 or more years at secondary level), p. 13. • Initial clinical journal entries (Journaling should include meetings with preceptor, planning activities, first impressions, and clinical activities if begun), guidelines p. 15. • Responses to 2 journal questions for Module I, p.16. • Contributions to discussion posted on Bb, 3 quality paragraphs per wk x 4 wks, p.18.
Module II Due Monday 3/22/10 (Wks. 5-8)	<u>Module II: Clinical Experience toward Meeting Goals and Learning Objectives</u> • 2nd clinical journal entries, p.15. • Responses to 2 journal questions, p.16. • If applicable, first Experienced School Nurse Project progress report/journaling due, p.13 • Contributions to discussion posted on Bb, 3 quality paragraphs per wk x 4 wks , p.18 • <i>Newsletter</i> placed on Bb Discussion Board, as well as sent with other Mod 2 work, p.19.

3/29/10 – 4/2/10	Spring Break
3/8/10 through 4/16/10 Wks 7-11	Mid-Term: Evaluation of Progress toward Student Goals and Learning Objectives • Meet with preceptor to review progress toward student Goals and Objectives, p.14 • Include brief mid-term summary of accomplishments in journaling. • 3-Way Conferences, includes clinical instructor, preceptor, student, p.14
Module III Due Monday 4/26/10 (Wks. 9-12)	<u>Module III: Progressing toward Completion of Goals and Learning Objectives</u> • 3rd clinical journal entries, p.15. • Responses to 2 journal questions, p.16. • Student contributions to discussion on Bb, 3 quality paragraphs per wk x 4 wks , p.18 • <i>Health Ed. Curriculum/Teaching or Aggregate Teach/Small Group Activity paper, pp.19-20</i> Share key elements of curriculum development/teaching experience on Discussion Board.
Networking	Support groups/students are encouraged to plan networking luncheon(s) and invite preceptors.
Module IV Due Monday 5/17/10 (Wks. 13-15)	<u>Module IV: Completion of Student Goals and Objectives, Clinical Competencies</u> • 4th clinical journal entries, p.15. • Responses to 2 journal questions, p.16. • Final Narrative Self Evaluation (1emailed to instructor/1 included with Mod. 4 work), p.14. • Preceptor Checklist of Student Competencies, secondary (Preceptor Syl. doc 4- s) • Preceptor Evaluation of Student Professional Dispositions (Preceptor Syllabus – doc 5) • Preceptor Evaluation of Course (Preceptor Syllabus – doc 6) • Student Evaluation of Preceptor Experience (Emailed to students prior to end of semester) • Student Evaluation of Course (Emailed to students prior to end of semester) • Post Program Student Evaluation of Program (Emailed prior to end of semester) • Post Program Knowledge Base Assessment Questionnaire (Back of N185 Assign. Booklet)
<i>Note: Those who have completed all of coursework requirements and two full years of school nursing practice are eligible to apply for their Clear Credential. For information go to http://education.csufresno.edu/applications/cred.htm</i>	

N187 COURSE OBJECTIVES

Upon completion of this course, the student will be able to:

1. Apply the Scope and Standards of School Nursing Practice at the secondary level.
2. Describe the multifaceted role of the secondary school nurse as it relates to the Nursing Process as a provider of health care, health educator, counselor, and advocate in meeting the health related needs of adolescents within legal parameters, ethical practice, and use of relevant theories.
3. Discuss the various health related issues and health care needs of the adolescent population with understanding for the legal rights of teens, issues related to confidentiality and counseling, case finding, referral, and follow up.
4. Demonstrate the application of Professional Dispositions in practice at secondary level.
5. Describe school nurse involvement in coordinated school health programs as a collaborator and active participant.
6. Demonstrate the ability to participate effectively in the IEP (Individual Education Plan) process as a member of the education team related to the role of the school nurse.
7. Demonstrate the ability to work effectively with community agencies and other resources in the community in meeting the health care needs of adolescents; collaborate to provide meaningful health education/health promotion programs for the student population; and participate meaningfully in disaster planning and preparedness.
8. Describe the various ways in which the school nurse at the second level is involved the curriculum evaluation and development, health teaching, and health promotion for students and staff.
9. Describe the role of the school nurse communicates effectively and in working with students and families of various culturally backgrounds.
10. Discuss the need for continuing education and involvement in professional organizations in order to stay abreast of what is happening in school nursing and meet current health related needs of the student population.

LEARNING ACTIVITIES

Supervised clinical practice, faculty-student conferences, electronic discussion board activities, individually planned experiences, journals, and written assignments.

COURSE REQUIREMENTS

Note: The following requirements must be met BEFORE field experience can begin:

Agreement between CSUF and the school district providing the field experience must be in place. To verify, contact Lindasue in the Nursing Department at lgarner@csufresno.edu immediately! The items noted below must be approved by your clinical instructor and must be in your file in the CSUF Nursing Department. If you were enrolled in N186 this past fall semester these things should be on file, however, it is important that you send updated copies of all items that may have become outdated, i.e., RN license. Send updated copies of documents to your instructor before beginning your clinical practice.

Required documentation that must be on file BEFORE clinical experience can begin:

1. Copy of current RN license. (Kept current throughout practicum experience.)
2. Copy of PHN Certificate/transcript reflecting community coursework from a university.
3. Proof of TB skin test within 6 months of entering School Nurse Practicum I the previous fall.
4. Proof of required immunizations.
5. Preliminary School Nurse Services Credential obtained from County Office of Ed.
6. Copy of current CPR certification, to be kept current throughout practicum experience.
7. Preceptor Vitae on file with the university.
8. Immediate Supervisor Approval for School Nurse to Act as Preceptor (signed).
9. Preceptor/Student Clinical Contract signed by both parties.
10. Note: Student malpractice insurance is covered through university in course fee.

NOTE: For a school nurse to qualify as a preceptor, he/she must hold a Clear School Nurse Services Credential and have been employed as school nurse for 5 full years. If your preceptor has acted in this capacity for CSUF within the past four years, check with your clinical instructor to verify that vitae are on file, if not or if over four years ago, vitae will need to be obtained. See Preceptor Syllabus for all forms.

REQUIRED TEXTS AND PUBLICATIONS

(Note: Most of these publications are the same as those required for NURS 184.)

Miller, B. (2010). *Nursing 187 Syllabus*. Fresno, CA: CSUF School Nurse Services

Credential Program. (approx. cost: \$3.50)

Miller, B. (2010). *Nursing 186/187 Preceptor Syllabus*. Fresno, CA: CSUF School Nurse

Services Credential Program. (Sent in Admission Packet)

California Dept. of Education. (2003). *Health framework for California public schools*.

Sacramento, CA: Author. (Approx. cost: \$20.00) Free online at www.CDE.ca.gov

- California Department of Education (2007). *Standards for scoliosis screening in California schools*. Sacramento, CA: Author. Free download from website at <http://www.cde.ca.gov/ls/he/hn/documents/scoliosissreening.pdf>
- California Department of Education (2006). *A Guide for vision testing in California public schools*. Sacramento, CA: Author. (Free download from website at <http://www.cde.ca.gov/re/pn/fd/documents/finalvisionreport.pdf>)
- California Department of Health Services, Immunization Branch. (2003). *California immunization handbook*. Berkeley, CA: Author. (Free copy on Orientation Day)
- California School Nurses Organization (2007). *Communicable disease flip chart*. Sacramento, CA: Author. (CSNO cost \$11.00 members/\$16.50 non-members)
- California School Nurses Organization (2007). *First Aid procedures flip chart*. Sacramento, CA: Author. (CSNO cost \$11.00 members/\$16.50 non-members or check for it at school sites.)
- California School Nurses Organization. (2009). *The greenbook: Guidelines for provision of special physical healthcare services in California schools*, part I (CD version only) (CSNO cost \$25.00 members/\$30.00 non-members)
- California School Nurses Organization (2007). *Role of the school nurse and health clerk*. Sacramento, CA: Author. (CSNO cost \$13.20 members/\$18.70 non-members)
- National Association of School Nurses. (1998). *Guidelines for school nursing documentation: Standards, issues, and models*. Scarborough, ME: Author. (NASN, \$22.00 members/\$33.00 non-members)
- National Association of School Nurses. (2002). *Care of students with special needs in Schools*. Scarborough, ME: Author. (NASN, \$25.00 members/\$35.00 non-member.)

National Association of School Nurses. (2004). *Using nursing languages in school nursing practice*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)

National Association of School Nurses. (2005). *Scope and standards of professional school nursing practice*. Scarborough, ME: Author. (NASN, \$15.00 members/non-members, \$20.00)

NURS 186, RECOMMENDED TEXTS AND PUBLICATIONS
(Optional only, NOT required)

Boynton, Rose W., Stephens, G. R., Pulcini, J. (2009). *Manual of ambulatory pediatrics*. Philadelphia, PA: Lippincott, Williams & Wilkins. (CSUF Kennel Bookstore or online, approx. \$60.00)

California School Nurses Organization (2000). *SARB and the school nurse*. Sacramento, CA: Author.

John Hopkins Hospital, Custer, J., Rau, R., Lee, C.K. (2008). *Harret lane handbook* (18th Ed.).

Mosby/Saunders. **Or** student MUST have a current pharmacology handbook of choice.

Lewis, K. D. & Bear, B. J. (2008). *Manual of school health* (2nd ed.). NY: Saunders.
(CSNO, \$47.00 members/\$52.00 non-members)

National Association of School Nurses. (2007). *Disaster preparedness: Guidelines for school nurses*. Scarborough, ME: Author. (NASN cost \$25.00 members/\$35.00 non-members)

National Association of School Nurses. (2007/2008) *NANDA's Nursing Diagnoses: Definition and classification*. Scarborough, ME: Author. (NASN, \$20.00 members/\$30.00 non-members)

Note: All CSNO and NASN publications are excellent library/resource materials. Complete lists of those publications can be found at their respective websites.

Order Information:

- Required textbooks for fall 2009 go on sale through the CSUF Kennel Book Store on July 27, 2009. Books can be ordered online at <http://www.kennelbookstore.com>, however, there is a shipping charge. Students coming to Orientation will have the opportunity to purchase books in the morning that same day from the bookstore.

Publications from other organizations / sources will need to be ordered online or by mail.

- California School Nurses Organization publications go to www.csno.org
- National Association of School Nurses go to www.nasn.org
- California Department of Education Bureau of Publications Sales Unit, P.O. Box 271, Sacramento, Ca 95802-0271, or by calling (916) 445-1260 or 1-800-995-4099 or FAX 916-323-8023.)
- California Dept. of Health Services, Publication Sales, 2151 Berkeley Way, Berkeley, CA 94704)

GRADING CRITERIA

A = 90 – 100%, B = 80 – 89%, C = 70 – 79%, D = 60 – 69%, F = 59% and below.

TEACHING STRATEGIES

With guidance and counseling from CSUF faculty, students gain knowledge in the clinical setting under the direct supervision of a qualified school nurse preceptor approved by faculty. Students are required to keep a journal of their clinical activities. The practicum includes a rounded experience in secondary school nursing, i.e., health teaching, counseling, case management of students with health problems; collaborating with other professionals at school sites; visiting community agencies; attending school nurse in-services and conferences; researching journal articles, websites, district policies, and CA codes to enhance knowledge; creating newsletters; communicating with legislators on relevant issues; class participation on Blackboard Discussion Board and in chat rooms sharing clinical experiences.

ASSIGNMENTS / EVALUATION

Assignment	Points
Student Goals and Learning Objectives	5
Clinical Journaling	14
Health Ed. Curriculum and Teach or Teaching Aggregate/Small Group Activity	16
Clinical Journal Questions	14
Newsletter	10
Blackboard Clinical Discussion participation	12
3-Way conference/communication between student, preceptor, and instructor.	5
Preceptor Evaluation of Student Competencies with/without Exp. SN Project	20
Narrative Self-Evaluation of Clinical Learning Experiences	2
Completion of Post Program Assessment Questionnaires	2
Total Points	100

Note: See Written Assignments/Grading Criteria for details.

READING REQUIREMENTS

Self-directed readings based on each student's needs according to course objectives and course assignments. Readings will include current journal articles relevant to school nursing, journal articles in N185 Manual, and other readings appropriate to the needs of the student, as well as presentations and information posted on Blackboard Discussion Board by classmates and instructors throughout the semester.

COMMUNICATION

- Students are to provide their new preceptor with their clinical instructor's email address and phone number as soon as it has been agreed that school nurse will act in that capacity. **The student is asked to request that their preceptor contact the student's clinical instructor via email to verify acceptance of role and responsibilities ASAP.**
- The Preceptor/Student Contract is to be faxed to student's clinical instructor as soon as it is signed as this completed document contains information the clinical instructor needs.
- Once preceptor qualifications have been verified, the clinical instructor will contact the preceptor to express appreciation and to discuss guidelines and responsibilities.
- Email and phone contacts will be used as an on-going means of communication between student, preceptor and clinical instructor throughout the semester.
- The clinical instructor is available to students by means of email, through "Ask Your Instructor" in Blackboard, telephone, and office visits. School site visits will be made by faculty if site is within reasonable driving range of the university. Office visits are to be

scheduled during office hours. (See front of syllabus for contact information.)

- A mandatory 3-way mid-term conference is to be arranged by the student between preceptor, clinical instructor, and student. Other 3-way conferences will take place at the request of the student, preceptor, or clinical instructor and/or as necessary.
- Written communication will take place through clinical journaling and other written assignments that will be reviewed by the clinical instructor with follow-up communication.

HOURS OF PRACTICUM EXPERIENCE

There are a Total of 135 Hours in the Practicum Experience.

Students will spend fifteen of those hours in class related communication as follows:

- Ten (10) hours participating in discussion on Blackboard Discussion Board. (Approximately 40 minutes per week throughout the semester.)
- Three (3) hours set aside for networking outside of Blackboard with area support group members, i.e., networking meetings/luncheon or networking lunch with preceptor.
- Two (2) hours spent in communication and conferencing with clinical instructor by email, telephone, and/or office visits. This also includes at least one 3-way conference between student, preceptor and instructor during the semester.
- The remaining 120 hours are broken down in clinical experience in the field.

Clinical Experience for Students Currently Employed as School Nurses.

Of the 120 hours remaining:

- Students who are **currently employed** as school nurses will be credited with 40 hours for their school nursing experience.
- These students will be responsible for completing 80 hours of clinical practice under the direct supervision of a qualified preceptor *away from their own worksite*. That clinical practice may be in the district in which the student is employed.
- Of those 80 hours, with preceptor approval, students *may* attend 3 school nurse meetings, conferences, workshops related to school nursing (up to 12 hours total). Not to include routine staff meetings related to job. These may be district, local, or CSNO meetings.
- Additionally, student *must* spend between 6 and 8 hours in activities involving the community that are relevant to school nursing, i.e., involvement with community groups/activities, visiting health referral agencies. Attending a SARB meeting is considered community involvement as long as outside agencies are involved.
Note: Activities away from the school site must be with preceptor pre-approval.
- The remaining 60 hours *must* be spent at school sites *working under the direct supervision of the preceptor or his/her school nurse designee*.

Experienced School Nurse Project:

- School nurses who have had two or more full years of school nursing experience at the secondary level may choose to use up to 20 of those remaining 60 clinical hours working on a project. (Explanation in entirety on p.13)

Expanded Leadership Role:

- Students may earn up to a maximum of ten (10) hours for actively pursuing a leadership role related to school nursing. To do this, students must petition their clinical instructor for an appropriate number of hours. Note: NOT an option for students who choose to complete an Experienced School Nurse Project. (Explanation in entirety on p.13)

Clinical Experience for the Student who are NOT Currently Employed as a School Nurse:

- Students *must* complete the full 120 hours under direct supervision of a preceptor.
- Of those 120 hours, students *must* attend a minimum of 3 school nurse meetings, conferences, workshops related to school nursing (up to 12 hours), with preceptor approval. These may be district, local, or CSNO meetings.
- Additionally, students *must* spend between 6 and 8 hours in activities involving the community that are relevant to school nursing, i.e., community groups/activities, visiting health referral agencies. These activities must be with preceptor pre-approval.
- The remaining 100 hours *must* be spent at school sites *working under the direct supervision of the preceptor or his/her school nurse designee.*

Nurses Currently Employed as Public Health Nurses:

- Nurses who are employed by a health department or other community agency will be given 20 hours of credit toward their clinical practice.
- Employer must be identified.

STUDENT GOALS AND LEARNING OBJECTIVES

1. *Student Goals and Learning Objectives: (Point value, 5)*

Student Goals and Learning Objectives **MUST** be developed with input from the student's preceptor. It is recommended that the *Preceptor Checklist* and competency evaluation tools, found in the *Preceptor Syllabus*, be reviewed before proceeding. Students are to write individual goals and learning objectives/learning activities, reflecting areas where experience is needed and/or areas of particular interest to the student within course guidelines. These are to be completed during the course of this practicum. Student goals/learning objectives/activities are to supplement the course objectives/assignments and are a chance for students to personalize his/her practicum experience. The aim should be a rounded experience in secondary school nursing. After Student Goals and Learning Objectives have been developed, they are to be sent to the student's clinical instructor for review and final approval. The student and his/her

preceptor should review the student's goals and objectives periodically throughout the semester to be sure that progress is being made.

2. *Students should have at least three (3) goals, along with 3-5 objectives for each goal, then 3-5 learning activities to accomplish each objective.* Goals are to be accomplished within the semester.

- Student having little or no previous experience in secondary school nursing (includes middle school and high school) will want to spend time at both the middle and high school level for a global perspective of secondary education. (See also *Suggested Guidelines for Time Spent in Clinical Practice*, page 23 of syllabus). The student will want to make an effort to become familiarizing the district Policy and Procedure Manual, spending some time observing in a special education classroom and in other specialty programs, interviewing other school professionals, and attending meetings, i.e., faculty meetings, School Site Council meeting, program development meetings, relevant community based meetings, etc.
- Student with experience at the secondary level will want to spend time in areas he/she is less familiar with: If the student has high school experience, he/she will want to spend time at the middle school level or vice-versa. Students should also seek experience in specialty areas such as alternative high schools; special education programs, i.e., a mental health unit, program for pregnant and parenting teens; working with a NP in a school site clinic dealing with adolescent health issues/sports injuries; time spent with an athletic trainer; involvement in planning a coordinated school health program; visiting community programs/agencies that are relevant to secondary school nursing, etc.

3. After deciding on your goals, develop learning objectives and learning activities to reach each goal. Determine your specific learning needs and activities in order to accomplish your goals. Important! You and your preceptor must agree on how and where you will spend your time in your practicum experience.

4. Example of a Goal, along with Learning Objectives, Learning activities, and Measurement (Use the following format in developing your own Student Goals and Learning Objectives.)

Goal I	To gain insight into the common health problems associated with secondary students.	
	Learning Objectives	Learning Activities
	A. Describe 5 common health problems associated with adolescents at the secondary level.	• Interview preceptor regarding the most common health problems associated with adolescents. • Review at least two valid sources of information related to each of these condition. • Interview 2 students in each of the identified categories of common health problems for insight into self care issues, management concerns, attitudes, self esteem.

B. Describe the assessment process used by the secondary school nurse in evaluating various health problems at the secondary level.	• Observe preceptor using the Nursing Process in determining and caring for an adolescent who may be diagnosed with one of the common health problems. • Interview preceptor regarding IHPs/EM care plans/504 that could be used in meeting the health care needs of a student diagnosed with a common health problem. • With preceptor guidance, carry out health assessments on at least 10 students coming into the health office with complaints related to the conditions noted above.
C. Determine screening methods used by the secondary school nurse to detect health problems in students at the middle school/ high school levels.	• Review sections of Ed Code related to mandated screening of students in grades 7-12 for insight into screening grade levels and guidelines. • Interview preceptor regarding steps in planning for the different types of mass screening, screening techniques, rescreening, referral, paperwork involved. • Assist preceptor in conducting 2 different types of mass screening in at least 2 secondary grade levels,
How Measured: (Examples) Preceptor feedback on demonstrated competency; accomplishment(s) as stated by student in journal.	

Note: Students who have NOT had previous experience at the secondary level in their own school nursing practice are free to use or modify the example noted above as one of their goals. **School nurses with two (2), or more, years of school nursing experience at the secondary level are expected to be more creative in developing their Student Goals and Learning Objectives.**

5. Timeline for Developing Student Goals and Learning Objectives:

Student Goals and Learning Objectives should be developed in, or before, the third semester week (within the first week of clinical experience). A rough draft of goals and objectives should be emailed to the student's clinical instructor for review and final approval. Students will be notified if goals and objectives have been approved or if changes are necessary. Once approved, points will be posted in the student's online grade book. Finalized Student Goals and Learning Objectives are to be included with other Module I work on due date indicated.

6. Accomplishing Student Goals, Learning Objectives, Skills, and Competencies:

Throughout the semester, students are to communicate frequently with their preceptor regarding progress they are making with regard to their goals and objectives, as well as keeping their clinical instructor informed through their clinical journaling. At the end of the semester students are to meet with their preceptor to go over progress made, both in carrying out planned learning activities related to goals and objectives and in accomplishing required competencies and skills listed in the *N186 Preceptor Checklist*. At the final meeting between preceptor and student, the Preceptor Evaluation of Student Competencies in *Preceptor Checklist* and *Preceptor Evaluation of Student Professional Dispositions* should be discussed, before being signed and sent to clinical instructor by the student's preceptor.

EXPERIENCED SCHOOL NURSE PROJECT

(School nurses with 2 or more years of secondary school nursing experience)

A Project would take the place of one of the three goals. The project must be approved by the preceptor and based upon a recognized need. It may take place in the student's school or that of the student's preceptor. It must be something that will benefit school nursing and/or the school district at the secondary level, and must be accomplished within the semester time frame.

Examples of projects: 1) Developing a PowerPoint presentation that can be presented to faculty, students, community groups or clubs. The presentation should be incorporated into a package along with materials and resources that other school nurses would also be able to use. 2) It could be a manual that includes a training program and the necessary teaching materials, i.e., training UAPs, emergency preparedness plan; crisis intervention action plan; a comprehensive resource binder of local community agencies. 3) The project could be the development of a packet of several presentation outlines that would be useful to other school nurses, i.e., board meetings, faculty meetings, parent groups, organizations. 4) The project could involve the school nurse role in the development of an inter departmental program, i.e., BMI and nutrition awareness; 5) It could be planning and carrying out a health fair on a secondary campus and the creation a resource manual for future fairs.

Completion of *Experienced School Nurse Practicum Project Proposal*:

4. Project proposal must include statement justifying the project, timelines for its completion within a give semester and *initialed by preceptor signifying approval*.
5. A copy of that signed form must be sent to clinical instructor with module I work.
6. Project progress notes must be written up separate from other journaling.
7. On completion of project, student's preceptor is to sign off on the project on the original form.
8. Completed project proposal, along with documentation verifying project, are to be sent to the clinical instructor.

Note: The Experienced School Nurse Project is worth 25% of the value of the preceptor evaluation of student's practicum experience (Point wise, 5 points out of 20 total points)

EXPANDED LEADERSHIP ROLE

(Open to all students except those choosing to do the Experienced School Nurse Project)

Students may earn up to a maximum of ten (10) hours for actively pursuing a leadership role related to school nursing. For example: Presentation of school nurse issues/or student health concerns to a school board, community group, parent group, school staff; a leadership role in a professional or community organization; chairing a school site committee; leadership role in health education; developing a school site plan for disaster/emergency health management; a fund raising activity related to children's health; participating in legislative advocacy relevant to

children's health or school nursing. This leadership role may be one that comes up during the semester. Students must petition their clinical instructor for a relevant number of hours. This is NOT an option for students who choose to complete an Experienced School Nurse Project.

MID-TERM PROGRESS CHECKPOINT

4. *Mid-Term Evaluation of Student Goals and Learning Objectives:*

Between the 7th and 11th week of the semester, students are to sit down with their preceptor to discuss progress towards achieving their goals and objectives. At this time changes may be made in the student's goals, learning objectives, or activities if necessary to benefit the student's learning experience, i.e. interest in another area, or to change/drop a learning activity because another opportunity as opened up or the experience is unavailable.

5. *Mid-Term Student Summary of Progress:*

In preparation for mid-term 3-way conference, students are to complete a one page summary on progress made towards meeting Students Goals and Objectives. This is also an opportunity for students to notify their clinical instructor of any need to change a goal, objectives, or learning activities to better suit the student's clinical experience and/or learning outcomes. Changes in goals and objectives should not be made without first consulting with the student's preceptor. The summary is to be emailed to the student's clinical instructor before the 3-way conference.

6. *Mid Semester Three-Way Conferences:* (Point value, 5)

Between the 7th and 11th week of the semester, students are to arrange a 3-way conference between themselves, their preceptor, and clinical instructor. The conference should take place when the student and preceptor are together at a school site. Students are to contact their clinical instructor to share contact information, i.e., time, place, numbers. Distance learners are to arrange a time for a 3-way telephone conference. Students in the Fresno area are to arrange a time for a site visit by their clinical instructor unless other arrangements have been made.

FINAL NARRATIVE SELF EVALUATION

Final Narrative Self Evaluation: (Point value, 2)

Students are to complete a *Final Narrative Self Evaluation* upon completing their clinical experience. This is to be a one-page summary of their clinical experience. It should include the following:

- Attainment of goals and objectives
- Areas of major learning and insight
- Strengths, new skills, improvements
- Changes, what you would have done differently
- Comments regarding practicum experience

Note: The following documents, found in the Preceptor Syllabus, MUST be received by the student's clinical instructor BY the end of the semester in order for the student to receive a final grade:

- *The Preceptor Checklist (clinical skills)*
- *Preceptor Evaluation of Student Clinical Competencies*
- *Preceptor Evaluation of Student Professional Dispositions*

CLINICAL JOURNAL GUIDELINES

Journaling begins with first meeting with preceptor to planning practicum experience: (Points, 16)

A. The purpose of weekly journaling is three-fold:

4. A method of keeping track of your hours and activities
2. It provides an ongoing communication with the clinical instructor
3. A method for sharing accomplishments, insights, and experiences.

B. Journal 2 pages using APA format for each 6-8 hour timeframe (equivalent to 1 day):

1. Within each 6-8 hour period list general experiences then, in detail using the steps in B2 below, describe **2** meaningful clinical encounters or insights you gained in that given period of time. These experiences could take place during a session with your preceptor, attendance at a conference or SN workshop, participation in a community activity, a meeting, or while visiting a community agency or program.

2. For a **clinical experience** succinctly describe the following:

- a. What you did (i.e., steps in the Nursing Process, including personal encounters);
- b. Information sources (i.e., preceptor, policy, code, website, article, nursing standard);
- c. What you learned (i.e., a process, skill, method, validation of own practice);
- d. How you plan to use the insight gained in your own SN practice.

3. For **conference/workshop/community activity**, succinctly describe the following:

- a. Type of activity, setting, type of attendees, and quality of the presentation;
- b. Sources of information for future reference related to topics covered/activity
- c. New and useful information that you learned related to subject matter/activity
- d. How you plan to use the insight gained in your own SN practice.

Example of Journaling:

Each new entry should begin with the following format and include “Date of Clinical Activity”, “Hours of Practice”, and “Remaining Hours” left in clinical practice, as follows:

Student Name

N187, Module I

Documentation of Clinical Time:

Semester Week	Date of Clinical Activity	Hours of Practice	Hours Remaining
3	2/9/10	3	77
3	2/12/10	5	72
4	2/16/10	2	70

Summary of Time Spent:

3.0 hours – Screening middle school students for scoliosis

3.5 hours – Managing health office traffic with preceptor

1.5 hours – Reviewing district Policies and Procedure Manual

2.0 hours –City/County School Nurse meeting on managing diabetes in school setting

(For meeting attendance, include a brief summary of topics covered in journaling)

Journal Narrative: *Example of elaboration on experiences.*

(Note: Double space journal entries. Journal approx. 2 pages for every 6-8 clinical hours)

Tuesday, 2/9/09, 9:00 a.m. –12:00 p.m. (Screening middle school students)

- a) I spent 3.5 hours at my preceptor’s middle school assisting with scoliosis screening of 7th and 8th grade students. My preceptor informed me that she had coordinated things with the P.E. teachers at the beginning of the semester and send out ‘negative’ consent slips to parents in the *Back to School Packet*. I had previously assisted her with putting together screening cards and in showing a short video to students in P.E. classes to prepare them for scoliosis screening. Today, the P.E. teachers cooperated by passing out screening cards and sending the students to designated areas for screening. About 3% of the students were identified as needing re-screening by an orthopedic surgeon who was scheduled to come to the school the end of the month. Using the scoliometer, I actually identified two students who appeared to have a mild curvature of the spine. My preceptor rechecked the student’s backs and confirmed my findings.
- b) Prior to screening day, I reviewed the CDE (2007) *Standards for Scoliosis Screening in CA Schools*. My preceptor explained to me the importance of planning and scheduling screening events. She also demonstrated use of the scoliometer and other screening techniques prior to screening students. I also appreciated having the opportunity to review the CSNO film, *Taking the Scare out of Scoliosis*, which was shown to students prior to screening.

- c) I learned that it was very important to prepare students on what to they should expect on screening day in order to gain their cooperation. I also learned important screening techniques, i.e., the importance of checking not only the student's back, but shoulder, hip, and leg for discrepancies. I also realized how much planning, coordination, and cooperation goes into planning a successful screening event.
- d) I plan to use what I have learned in the area of planning and organizing scoliosis screening, and in preparing students for screening, in my school nursing practice.

Note: It is not expected that your first journal entries for Module I will include more than opening statements, initial meeting with your preceptor to discuss student goals and learning objectives and plans for the semester, insight into clinical school site and staff, etc. If clinical practice has been started prior to the third week it should be included.

JOURNAL QUESTIONS

(Point value, 2 points per question, 16 points total)

There are two clusters of questions that students need to respond to for each module period. The following seven (7) clusters of questions relate to different aspects of your secondary school nursing practice or preceptor experience. Responses to each cluster of questions should be 1 to 1.5 pages (APA format). Responses to journal questions should be titled and written up separate from clinical journal entries.

Module I:

- 1) Discuss the school nurse's role with your preceptor. How does the role of the school nurse in the secondary setting differ from that in the elementary setting? What skills/ expertise/ experiences are most useful in the high school setting? What are the most common issues/concerns in this setting?
- 2) Find out about the ethnic breakdown percentages of a district high school in your area, or that of your preceptor, and the specific health concerns relevant to each culturally diverse group. Do health issues specific to those who are of a different cultural differ from health concerns of the overall high school population? Talk to your preceptor about the role the school nurse plays in ameliorating these problems and share your findings.

Module II:

- 1) Review with your preceptor the district's health education curriculum for his/her high school or middle school (or a secondary school in your own practice). Briefly summarize what is covered and the gaps that may exist. How much of this curriculum does the school nurse implement? Who/what is responsible for approving/selecting/developing health curriculum in your district? What legal guidelines determine subject matter taught? Give an example. How can the school nurse have a voice in subject matter taught?
- 2) Read a **research article** written by a school nurse(s) doing research in a school or community health setting on a problem pertinent to adolescents (e.g., Journal of School Nursing, American Journal of Public Health, Journal of School Health, Nursing Research, Public Health Nursing). Summarize the article (1-2 pages) and discuss the pertinence of the research findings to your school nursing practice. Why is it important for school nurses to participate in research? Have you been involved/considered getting involved in a research project? (Note: Research articles should include data, statistics, and an abstract.)

Module III:

- 1) Interview your supervisor and/or preceptor regarding the various types of billing that take place through your district through Health Services. Discuss the role of the school nurse with regard to billing responsibilities. Who benefits from reimbursement back to the district for school nursing services? If the money returns to health services, how is it used? If billing does not take place through health services in your district, discuss funding issues and impact on programs and staffing.
- 2) Discuss alternative programs for adolescents and young adults in your area. What programs exist for those who individuals who reach age 22 and no longer qualify for Special Education in the school district? Take an opportunity to find out about these programs. Plan to make a site visit to at least one program site. Share your findings.

Module IV:

- 1) Has your philosophy of school nursing changed in the last year? Discuss your plans for continuing your professional growth in school nursing practice. How do you plan to continue to promote your professional image among fellow professionals and students? What value will you place on membership and involvement in professional organizations relevant to school nursing, give reasons and examples.

BLACKBOARD DISCUSSION BOARD PARTICIPATION

(Point Value, 12)

In Nursing 187, Students should plan to spend approximately 40 minutes per week participating in discussion on Blackboard. This includes reading time as well as writing time.

Guidelines for Participation:

- The time spent on the discussion board may be broken down into increments to suit the student's own schedule.
- The clinical instructor will open bi-monthly forums on the Discussion Board with suggested topics/prompts for discussion. Students will also be free to bring up topics of interest to discuss such as clinical situations/problems, share information on workshops, job opportunities, lesson plans, and other information of interest to fellow students.
- Contributions to discussion should be meaningful to fellow students and relevant to school nursing. Students should feel free to enjoy the networking and discussions.
- Writing guidelines for discussion participation:
Three quality paragraphs per week Note: A paragraph is described as one opening sentence, at least 3 supporting sentences, and a closing sentence.
- Week One, students are free to get acquainted with Blackboard. Familiarize yourselves with where to find things, i.e., course documents, assignments, other. There are no specific guidelines to follow.
- Week Two, instructor will open a forum for students to begin to participating in casual discussion, i.e., chat with classmates, share information about family, job, caseload, interests, time spent during the holidays, and responding to input from others.
- Week Three, clinical practice formally begins, instructor will provide prompts for discussion relevant to SN practice. Students are also encouraged to share case scenarios/clinical problems for discussion.

WRITTEN ASSIGNMENTS

1. Newsletter (Due with Module II)

(Point Value 10)

- Develop a two-page newsletter (not just an article or a flyer) with plans to distribute it to students/families or faculty/staff. The newsletter should include the following: Newsletter title, author's name and title, an opening paragraph directed at a specific group of readers, articles/subject matter of the newsletter and closing with information on how to contact the school nurse.
- Make sure that the subject matter relates to age appropriate adolescent health issues. Students can use a theme for their newsletter, addressing several aspects of the theme in titled sections; or students can incorporate several 'news briefs' in their newsletter on different topics. Sources where information was found should always be included.
- Be creative! It should look professional and eye catching through use of color, clipart, and an accepted newsletter format (columns) through use of a template developed by *Microsoft office, Microsoft publisher, Print shop, etc.*

- Students should actually plan to send out their newsletter to targeted readers in their own school district or that of their preceptor. Before distributing it, the newsletter must be read and approved of by the student's preceptor, and permission must be obtained from the school principal or designee.
- Post your newsletter on the N187 Blackboard in the forum created for that purpose.
- In sending newsletter along electronically with other Module II work, include a cover page with a one-two paragraph narrative commenting on your learning experience, what you would/would not do differently, how well it was received, i.e., feedback from preceptor, fellow professionals and/or recipients of the newsletter.

*Students will do ONE of the following two assignments: **the Health Education Curriculum Proposal and Teach or the Aggregate Teaching/Small Group Activity.** (Module III)*

2. Health Education Curriculum Proposal and Teach

(Point value, 16)

- Speak with your preceptor and school site teachers (those who teach health curriculum) regarding what is included in the secondary health curriculum at the school site.
- Select a topic that is NOT included in the curriculum or is not addressed, i.e., sun exposure/tanning, tattooing, body piercing, testicular self-exam, CPR for students, etc.
- Discuss with your preceptor and classroom/PE teacher, one who is likely to teach the subject matter, about the possibility of incorporating this proposed topic into the curriculum. This may also need to be discussed with a school site curriculum committee and/or school site administrator.
- Review Ed Code and applicable district policies related to subject matter, i.e., parent permission to present information on reproductive issues, etc.
- Following approval, write a 3-4 page proposal, including the following:
 - Problem statement and justification for topic inclusion
 - Summaries of current literature/research (2 current journal articles and 1 website search)
 - Comment on Ed Code, district policy – whether or not necessary and/or appropriate.
 - Incorporate guidelines from CDE *Health Framework for California Public Schools* (2003), in justifying subject matter and grade level appropriateness.
 - Briefly discuss two relevant learning theories that apply.
 - Apply Neuman's Systems Model as it relates to health education.
 - Discuss process for implementation (steps taken to incorporate curriculum, i.e., approval from whom, grade level, course, how, where, when it will be taught, teacher/SN to whom curriculum will be given to incorporate into current curriculum.)
 - Include reference sources and teaching materials such as handouts.
- Design a Teaching Plan on this topic using the Teaching Plan Outline below as a guide.
- Carry out your plans to teach the lesson to the appropriate group with observation by your preceptor and/or classroom teacher present. Request feedback on effectiveness of teaching.
- Summarize your teaching experience on a separate sheet of paper (0.5 page). Discuss impressions/successes/things you would do differently.
- Share teaching outline and sources with classmates on Blackboard.

What to include in the Teaching Plan Outline:

- Topic
 - Main Goal/Objective of Lesson
 - Behavioral Objectives for Learners (use measurable action verbs!)
 - Teaching Methods (lesson activities)
 - Evidence of learner readiness and why do they need this information.
 - Setting/room arrangement
 - Materials (visual aids, A-V, handouts, etc.)
 - Content outline should including introduction, body, and summary.
- *Note---this outline should be complete (basic information, but in outline format).

So that another SN or teacher (familiar with the topic) would be able to effectively give the presentation using this outline. (A content outline that consists of main topics only without underlying facts and rationale does not meet the criteria.)

- Method of Learner Evaluation, i.e., Pre/Post-Test (copy to be sent with paper).
 - References/sources where teaching materials can be found.
- (Note: Teaching time only may be subtracted from clinical hours.)

OR students may choose to do:

- 1. The Aggregate Teaching/Small Group Activity** (Point value, 16)
 - a) Locate an aggregate with a particular health education/counseling need, i.e. pregnant minors, school-age parents, continuation students, nutritionally at-risk students, athletes, smokers, etc. (Check with preceptor, psychologist, counselor, teachers, others.)
 - b) Group size should be approximately 6-12 students. It is best to utilize an already-existing group. Plan early for this assignment & check with your preceptor for possible existing groups/sites. If there are none of these types of groups available at a school site, obtain approval from preceptor to attend some other type of organized group function in your community that meets the needs of secondary school children.
 - c) Interview your preceptor and/or teacher regarding the appropriateness of subject matter for group discussions.
 - d) Review the following: “Group process/dynamics/theory (N185 Madden Library Electronic Reserve, week 4); 2 literature/research articles, and at least 1 website, relevant to discussion topics planned; learning theories; cultural theory(s) as appropriate; Education Code; district policies relevant to subject matter; Neuman’s Systems Model as it may relate to learning; and the CDE *Health Framework for California Public Schools* with regard to grade level appropriateness.
 - e) When planning, think in terms of a less structured support group approach.
 - f) **Prepare informal lessons and group discussion/activity on a pertinent topic(s).** Try to focus these sessions on support (not formal teaching), bringing them necessary information, and discussing what is of interest to the group.

- g) Plan to meet with this group on a continuing basis for a minimum of **3 sessions**.
- h) Ask your preceptor sit in on at least one of your sessions. Request feedback from preceptor and classroom teacher regarding effectiveness of small group session.
- i) Written assignment:
- 1) Using APA format, write a 3 page paper to include the following:
 - Explain reason for your small group selection and associated health issues.
 - Comment on information/insight gained through interviews with preceptor, teachers, others that helped you in planning small group activities.
 - Justify learner readiness and subject matter as it relates to *CDE Health Framework for Public Schools*
 - Outline the utilization of small group process/theory.
 - Include at least one or more learning theories that could apply.
 - Comment on Neuman's System Model with application to teaching.
 - Comment on Ed. Code/district policies that may apply and any steps taken to meet those requirements prior to group discussions, i.e., reproductive organs.
 - Summarize findings from 2 journal/research sources and 1 website search on subject matter planned for discussions (write at least 1 quality paragraph for each). One research article/website search may relate to cultural differences.
 - Describe the steps taken to implement small group activities.
 - 2) Develop outlines for each session that includes planned activities (1 page each). At the beginning of each outline indicate the date and time session takes place.
 - 3) Write a post sessions report (total of 2 pages) describing the experience, i.e., the make-up of the group; how group responded to you at the first session and by the final session; issues such as communication effectiveness, group dynamics, problems, quality of open discussion, effective learning activities; final outcomes, such as student learning, behavior or attitude changes.
 - 4) Include a final paragraph commenting on your own teaching experience, i.e., satisfaction with your teaching effectiveness, things you would change in the future. Include feedback from preceptor/classroom teacher.
 - 5) When turning in assignment, include handouts and other materials used in small group discussions.
- j) Briefly share your experience with classmates on Blackboard Discussion Board, i.e., topic, highlights, outlines, recommendations, other.

Reminder: In completing clinical journaling and written assignments for the course, carefully proof reading is essential. A paper with more than 6 spelling and/or grammatical errors might receive a lower grade or, in extreme cases, a request will be made that student rewrite the paper. Among evaluative criteria employed by the instructor are clarity, neatness, organization, support for ideas expressed, and grammar.

WRITTEN ASSIGNMENTS / GRADING CRITERIA

1. Student Goals and Learning Objectives

(Total 5 Pts.)

Appropriateness (grade/age level, etc.)	2
Complete and thorough	3

2. Newsletter

(Total 10 Pts.)

Appropriateness of subject matter	2
Quality of narrative (succinct, interesting, informative)	4
Creativity/Layout (columns, graphics/clipart)	2
Self-evaluation (strengths/weaknesses); feedback from readers	1
Writing skill, neatness	1

3. Student Selected Assignment

Students are to select 1 of the following 2 assignments

a. Health Education Curriculum Proposal

(Total 16 Pts.)

Appropriateness of subject matter/grade level	1
Insight/analysis of problem and justification for including in curriculum	2
Application of Neuman Systems Model	1
Review of literature/research (2 articles/1 website search), Learning theories (2)	2.5
Review district policy, Ed. Code, and Health Framework for CA Public Schools	1.5
Process for implementation/ thoroughness	3
Teaching Outline completeness	3
Feedback on teaching effectiveness	1
Writing skill/APA format	1

OR

b. Aggregate Teaching/Small Group Activity

(Total 16 Pts.)

Explain reasons for small group selection and relevant health issues	1
Understanding/application Small Group Process; at least 1 learning theory	2
Application of Newman Systems Model and Health Framework for CA Schools	2
Review/elaborate on appropriate Ed. Code, District policies	1
Review of literature, 2 journal sources and 1 website (1 quality paragraph for each)	3
Teaching outline, group activities, handouts, appropriateness of material for group	4
Evidence of aggregate input, group dynamics	1
Evaluation of learning outcomes/teaching effectiveness	1
Writing skill/APA format, teaching outlines shared on Blackboard	1

4. Clinical Journaling

(Total 14 Pts.)

Thorough and complete weekly journal entries (1-2 pages q day/6-8 hr. period)	8
Evidence of interaction with students/faculty/administration in clinical experience	2
Application of experiences to student's own school nursing practice	2
Journal organization, neatness, writing skill	2

5. Journal Questions

(Total 14 Pts.)

Journal questions – Insight and depth of analysis (7 @ 2 points each)	14

6. Final Narrative Self-Evaluation

Quality of analysis of clinical experience related to personal growth	2

SUGGESTED GUIDELINES FOR TIME SPENT IN CLINICAL PRACTICE
BY STUDENTS **NEW** TO SECONDARY SCHOOL NURSING

CLINICAL ACTIVITY CHART

ACTIVITY	80 HRS.	120 HRS.
Health office management/student visits to Health Office	8 to 9 hrs	14 to 16 hrs
Screening (hearing, vision, dental, scoliosis)	5 to 6 hrs	10 to 12 hrs
Immunizations (paperwork, clinics, follow-up)	4 to 6 hrs	7 to 10 hrs
Medications/special procedures	4 to 5 hrs	6 to 8 hrs
Home visits, parent contacts	3 to 4 hrs	4 to 5 hrs
Case management, chronic conditions health care/action plans	4 to 5 hrs	8 to 10 hrs
Other programs, i.e., Special Ed.	4 to 5 hrs	6 to 8 hrs
Health teaching (classroom, groups, health fair)	4 to 5 hrs	7 to 8 hrs
Faculty meetings and other school activities	2 to 3 hrs	5 to 6 hrs
Health assessment, health histories, IEP, 504 work-ups	6 to 7 hrs	7 to 8 hrs
Meeting attendance, SST, IEP, 504	3 to 5 hrs	5 to 7 hrs
Record keeping and report writing	3 to 4 hrs	5 to 7 hrs

Further Use of Clinical Hours

With approval from preceptor, all students should make every effort to attend at least 2 school nurse in-services during the semester (up to 12 conference hours), and must spend between 6-8 hours involved in community related activities, i.e., visiting health agencies relevant to adolescent health, SARB meetings, and/or other activities relevant to secondary school nursing.

CALENDAR AND INSTRUCTIONS FOR SENDING COMPLETED ASSIGNMENTS

- A. Completed module work is due on the Monday following the last Friday of each module.
- B. A grace period of 4 days will follow due date without penalty. Grace period officially ends at 11:59 PM on the date indicated.

Module No.	Begins Tuesday	Ends Friday	Send Date	Grace Period Ends	Late Work Deduction
I	Monday 1/25/10	Friday 2/19/10	Monday 2/22/10	Friday 2/26/10	10% per wk
II	Monday 2/22/10	Friday 3/19/10	Monday 3/22/10	Friday 3/26/10	10% per wk
3/8/10 4/16/10	Window of time allotted for mid-term self-evaluation and 3-way conference between clinical instructor, preceptor, and student.				
III	3/22/10	4/23/10	4/26/10	4/30/10	10% per wk
IV	4/26/10	5/14/10	5/17/10	5/21/10	10% per day

C. Steps to Send Work:

- Work is to be sent electronically through Blackboard using ‘Assignment Drop Off’ which is located in the N187 “Assignments” section.
- Module work sent must have a cover sheet with module title and student identity.
- All module work must be sent as one single document that includes: Clinical journaling, responses to journal questions, and other assignment work as indicated.

- Each assignment (clinical journaling, responses to journal questions and other assignment work) must be clearly titled, questions must be restated (10 font, single spaced), and each individual assignment must begin on a new page.
- After reviewing student assignment work, the student's clinical instructor will make comments regarding the work sent in the Assignment Drop Off window provided and in an attachment in that same area. Points will be posted in the student's online grade book following review (Allow 10-14 days).
- If a student has unavoidable circumstances that prevents him/her from sending work on time, that student MUST notify the instructor before the assignment due date. (Points for late work apply)

NOTE REGARDING FINAL GRADE:

A final grade cannot be assigned without BOTH the written assignments and satisfactory completion of the following: (1) The *Preceptor checklist*, (2) *Preceptor Evaluation of Student Clinical Competencies*, and (3) *Preceptor Evaluation of Student Professional Dispositions*. Both clinical competence and written work will be judged in assigning the final grade.

N187 PRECEPTOR CHECKLIST (SECONDARY)

Student use only – see N186/187 Preceptor Syllabus for preceptor signature copy

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the secondary level and explains/demonstrates to the preceptor satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

COMPETENCIES / SKILLS					
Providing Health and Wellness Services (Primary Intervention)					
					Comment if not met
		Met		Date	
		Y	N		
S1	Correctly carries out the Nursing Process in problem solving and in caring for preadolescents/adolescent in school setting.				NOT for official use as preceptor check off
S2	Demonstrates competency in planning, organizing, and conducting mass screening to detect deviations from norm related to vision, hearing, scoliosis, and Acanthosis Nigricans				
S3	Demonstrates the ability to develop age appropriate health curriculum and competently teach or facilitate a group discussion in keeping with district policy and the Ed Code.				
S4	Correctly identifies relevant community resources for adolescent population and makes appropriate referrals.				
S5	Properly trains/supervises medication administration and procedures carried out by unlicensed personnel.				
S6	Explains insight into importance of campus security and describes issues, i.e., gang activity, weapons on campus, other.				
S7	Demonstrates an understanding for emergency steps in school wide emergencies, i.e., natural disasters, bomb threats				
S8	Utilizes effective communication skills and sensitivity when assisting/counseling with adolescents, families, and staff.				
S9	Identifies appropriate programs/services for students/families with special needs/problems (e.g., mental health, family planning needs, prenatal care).				
S10	Takes leadership role in assisting and referring students and families to appropriate services within the community				

S11	Demonstrates ability to promote healthy nutrition and a healthy lifestyle among adolescents and staff through modeling, health promotion, and health education at the secondary level.				
S12	Discusses various health issues associated with different types of athletic activities and nutritional requirements.				
S13	Expresses insight into the role of the SN as a participant in providing coordinated health services and programs at the secondary level to better manage limited resources.				
S14	Describes at least 5 things related to organizing and implementing an overall school health program at the secondary level.				
S15	Demonstrates ability to promote mental health among adolescents and school staff through recognition of need, assessment, counseling, and referral for appropriate services.				
S16	Participates in reporting of suspected child abuse as it relates to unlawful sexual activity/abuse, including date rape. Discusses laws regarding reporting sexual activity among minors.				
S17	Describes signs and symptoms of substance abuse, assessment, reporting, and referral guidelines, and appropriate referral agencies for substance abusers and families.				
S18	Discusses issues associated with adolescent absenteeism and the role of the school nurse in preventing school drop-out. Describes various alternative programs to help teens/young adults complete schooling.				

SNC 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)

		Met			
		Y	N		Comments
S19	Demonstrates ability to provide healthcare services to students and emergency and/or first aid assistance to others in the school setting.				
S20	Demonstrates the ability to properly evaluate and manage various types of sports injuries, including acute injuries, makes appropriate referral.				
S21	Relates insight into behavioral, emotional, and mental health issues that affect adolescents, uses appropriate counseling techniques and referrals to appropriate professional within the school and community.				
S22	Describes signs/symptoms of at least 2 types of eating disorders. Given the opportunity, demonstrates appropriate counseling techniques, contacts the				

	correct individuals and refers appropriately.				
S23	Describes signs of depression and suicide threat. Demonstrates ability to use appropriate counseling techniques and guidelines regarding sharing confidential information in the best interest of the individual and others. Describes appropriate contacts and referral.				
S24	Demonstrates ability to counsel with pregnant teens, with knowledge of confidentiality guidelines, available programs and referral agencies and role of SN in health promotion and discouraging absenteeism.				
S25	Describes signs and symptoms of at least 3 types of substance abuse other than alcohol. Describes role of the school nurse in assessment, counseling, and referral to appropriate professionals and services.				
S26	Uses the appropriate counseling techniques with students suspected of having an STD, makes referral to appropriate community agency. Discusses issues related to spread of communicable disease.				
S27	Demonstrates ability to case manage the multifaceted health related needs of an adolescent, i.e., a pregnant teen – MediCal/insurance, affordable and appropriate healthcare and programs.				
S28	Describes role of the school nurse in making sure that students properly take/use medication how/when ordered, including self-carry.				
S29	Demonstrates understanding for needs of wheelchair bound individuals and students dependent on other types of health related equipment, i.e. access to facilities, personal assistance needs, body alignment issues.				
S30	Describes the role of the school nurse as a member of the school crisis team in planning, responding, and participating in crisis intervention.				
School Nurse Competencies 3. Professional Management Skills			Excellent = 5 and Poor = 1		
		5	4	3	2 1
S31	Demonstrates the ability to use his/her professional knowledge and skills to promote the overall health of the school community.				
Comments:					
S32	Demonstrates the ability to advocate appropriately with students and others in the school community to promote healthy behaviors and lifestyles among adolescents and staff at the secondary level.				
Comments:					
			Excellent = 5 and Poor = 1		

		5	4	3	2	1
S33	Demonstrates the ability to model evidence-based health care practices in the delivery of school nursing services at the secondary level (research), as well as uses a theoretical base to guide practice.					
Comments:						
S34	Communicate effectively in writing and can makes clear oral presentations to a wide variety of audiences.					
Comments:						
S35	Demonstrates sensitivity towards adolescent emotional, social, cultural, and developmental needs, as well as the needs of others.					
Comments:						
S36	Demonstrates understanding for legal guidelines regarding access to health records, HIPAA, FERPA, and other confidentiality matters, both written and verbal.					
Comments:						
S37	Demonstrates the ability to use time effectively, adapt to new and unanticipated situations, and to manage fiscal and personnel resources prudently.					
Comments:						
S38	Demonstrates ability to work in a collaborative and collegial manner with others at the secondary level.					
Comments:						
S39	Expresses understanding for what is involved in maintaining a comprehensive school health services program.					
Comments:						
S40	Demonstrates a global understanding for the role of the school nurse as it relates to school and community.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Community/juvenile court school	☐ School nurse in-services/conferences
☐ Continuation high School	☐ Program for emotionally disturbed
☐ Drug intervention program	☐ Faculty/staff in-service, School Council mtg.
☐ Health/career fair planning, participation	☐ Student Attendance Review Board
☐ School nurse in-services/conferences	☐ Teen pregnancy/parenting program
☐ Health teaching in a classroom	☐ Facilitated a small group

California State University, Fresno
School Nurse Services Credential program

EXPERIENCED SCHOOL NURSE PRACTICUM PROJECT PROPOSAL

For students with two full years of school nursing experience at the secondary level

Up to 20 hours of practicum time may be used for a significant project relevant to school nursing. If the full 20 hours are not used for the project, the remaining hours must be spent in other clinical areas to complete the total number of necessary practicum hours for the semester.

A section in the student's journal must be set aside to keep track of project hours and progress.

This project must:

- Be approved by your preceptor as indicated by his/her signature below.
- Be based on a school nursing need in your district or that of your preceptor.
- Include documentation of progress in your clinical journal of hours spent and progress made. Project journaling is to be titled and separate from other weekly journal entries.
- Include a proposal and justification (see below).
- Include an **end product** that can be reviewed / evaluated by student's clinical instructor.

Student Name_____

Proposal:

Justification:

Preceptor initial project proposal approval:

(Signature)_____ Date_____

Preceptor final project review and approved:

(Signature)_____ Date_____

FAX project proposal to clinical instructor for initial approval. Mail original signed by preceptor to student's clinical instructor along with project summary report and evidence of final product to clinical instructor for final approval.

UNIVERSITY POLICY STATEMENTS

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in Madden Library 1049 (278-2811).

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the [Class Schedule](#) (Policy/Legal Statements) or the [University Catalog](#) (University policies)

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from [Information Technology Services](#) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

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CSUF Department of Nursing
School Nurse Services Credential Program
2009-2010

To: Immediate Supervisor of Employed School Nurse Credential Program Student:
From: Beverly Miller, Program Coordinator
Regarding: School Nurse Employee Enrolled in School Nurse Services Credential Program
(school nurse student) _____

Thank you for working out a schedule that will meet the needs of both your school district and that of your school nurse in allowing this student the necessary time away from his/her place of employment to complete the required number of clinical hours which must be completed under the supervision of a qualified preceptor. Having a fully credentialed school nurse benefits your district and will bring assurance of ongoing qualified professional school nurse services.

The CSUF post-baccalaureate School Nurse Services Credential Program course of study meets the educational requirements established by the CCTC (California Commission on Teacher Credentialing) for the Clear Professional School Nurse Services Credential. Nurses who currently hold a preliminary credential have five years to complete educational requirements to obtain their Professional Clear Credential in order to continue practicing school nursing.

The school nurse who is currently employed full-time by a school district, who has not completed the practicum portion of the credential program, needs the opportunity to work under the direct supervision of a qualified school nurse preceptor. To ensure an optimal uninterrupted learning experience, the student must spend that clinical time away from his/her own place of employment during regular school hours.

The number of hours of clinical experience necessary for a CSUF school nurse student who is employed as a school nurse is eighty hours for each of two semesters. Students work with elementary school age students in the fall semester and secondary students in the spring. The time necessary to complete the practicum hours for a school nurse student amounts to approximately six hours per week. This time should include both morning and afternoon hours for a meaningful experience. There is flexibility with regard to where some time can be spent. For example, school nurse meetings/conferences and community activities may take place during other than school hours, and some leadership activities/experienced school nurse project activities may take place at the student's school of employment. Note: Students employed as school nurses are automatically given 40 hours credit, those not employed are required to complete 120 hours.

For questions contact Beverly Miller by phone at (559) 278-6252 or by E-mail at bmiller@csufresno.edu

NURS 186/187
Preceptor Syllabus
Fall 2010 - Spring 2011

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing
SCHOOL NURSE SERVICES CREDENTIAL PROGRAM

2010-2011 Academic Year

From: Beverly Miller, Program Coordinator
School Nurse Services Credential Program

To: _____
School Nurse Student Preceptor

If you have received this packet, you have agreed to precept a school nurse student who is enrolled in the CSU, Fresno School Nurse Services Credential Program in a practicum course. Please read through the attached packet carefully as it contains the following: Course descriptions and objectives, preceptor guidelines, roles and responsibilities, contract forms, and performance evaluation tools.

In the interest of establishing early and ongoing communication please email Beverly Miller, Program Coordinator at your earliest convenience to confirm your commitment to act as a preceptor in the CSUF School Nurse Services Credential Program. Your student's clinical instructor will contact you shortly after your email has been received to review roles and responsibilities with you and to answer any questions you may have regarding your student's practicum experience. It is very important to us that you feel supported by faculty throughout the semester. Please feel free to contact faculty at any time with any and all questions and/or concerns.

Thank you for agreeing to precept a CSUF graduate student. Your time and commitment is greatly appreciated. If you have any questions, I can be contacted at:

Beverly Miller, RN, BSN, MPA/HS, Coordinator
School Nurse Services Credential Program

E-mail: Bmiller@csufresno.edu
Office: (559) 278-6252
Fax: (559) 278-1013

NURSING 186 / NURSING 187 PRECEPTOR SYLLABUS

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(Note: Syllabus page numbers do not correspond with this Program Assessment document)

California State University, Fresno
Department of Nursing
SCHOOL NURSE SERVICES CREDENTIAL PROGRAM

Program Course Overview

Nursing 186 and Nursing 187 are each advanced practicum courses in the School Nurse Services Credential Program. These courses are designed to be the culminating experiences for students enrolled in the program and to prepare them for the challenging role of the school nurse. Specifically, NURS 186 is a practicum encompassing school health services at the elementary level (pre-school through 8th (grade), including special education services: NURS 187 is the practicum in the secondary school setting (grades 7-12), with a focus on the problems and needs of adolescents. Each practicum is a three unit course. These practica present an opportunity for students to participate in a comprehensive school health program. With preceptor supervision, students are expected to function as school nurses, providing the full range of services that are generally carried out by the school nurse at the elementary or secondary level. NURS 184 (Introduction to School Nursing) is a prerequisite or co-requisite to the elementary practicum course (NURS 186). These two courses are offered in fall semester. NURS 185 (Seminar in School Nursing) is a prerequisite or co-requisite to the secondary practicum course (NURS 187), and is offered in the spring. For students in the program, prerequisites to NURS 184, NURS 185, NURS 186, and NURS 187 include: CDDS 125, Audiometry for School Nurses (leading to an Audiometrist Certificate); COUN 174, Introduction to Counseling; SPED 120, Introduction to Special Education; NURS 136, Health Appraisal; NURS 137, Teaching Perspectives for the Healthcare Client; and NURS 183, Vision and Scoliosis in the School Setting.

In this syllabus preceptors will find the necessary information and guidelines needed to assist their student(s) in gaining a wide range of clinical experiences and to help them in meeting their goals and learning objectives for the semester. Please note: Course objectives for NURS 186, School Nurse Practicum I, (elementary) and NURS 187, School Nurse Practicum II, (secondary), as well as scheduled course content in NURS 184, Introduction to School Nursing, and NURS 185, School Nurse Seminar have been included in this syllabus for preceptor insight into student clinical expectations and didactic coursework covered in the program.

COURSE OBJECTIVES AND SCHEDULED COURSE CONTENT

(Provided for Preceptor Insight into student clinical expectations and didactic coursework)

NURS 186 Course Objectives (Elementary Practicum) Fall

Upon completion of the course, the student will be able to:

1. Apply Neuman's Systems Model and other appropriate theories in the provision of elementary school nursing services.
2. Incorporate current applicable research into school nursing practice.
3. Analyze the components of a comprehensive school health program and contribute to the formulation of school health policies.
4. Develop individualized health care plans utilizing the nursing process and cross-cultural nursing concepts.
5. Participate in interdisciplinary collaboration to promote the health, development, and educational needs of students.
6. Promote wellness in students, staff, and parents through health education programs and effective use of community resources.
7. Utilize effective communication skills with students, families, and staff.
8. Work as a member of a school interdisciplinary team to design interventions for children with special needs (e.g., special education, gifted programs, specialized physical health care, behavior problems, ADD, child abuse).
9. Relate the multiple roles and functions of the school nurse and an awareness of ethical and legal considerations in school nursing practice.
10. Assist in the supervision of ancillary school health service personnel.
11. Function as a manager of health care in the school setting.
12. Structure learning activities to meet own individual needs and to expand personal growth and development.

NURS 187 Course Objectives (Secondary Practicum) Spring

Upon completion of this course, the student will be able to:

1. Describe the role of the school nurse in the secondary school setting.
2. Apply appropriate theories in the provision of secondary school nursing services.

3. Utilize the nursing process in researching and addressing problems of adolescents and in delivery of nursing care in the middle school and high school setting.
4. Participate in the maintenance of a comprehensive school health program in the secondary educational setting.
5. Use community resources for referral of students with unmet health needs.
6. Explain the importance of interdisciplinary collaboration in the school and community.
7. Assist students, families, and staff to achieve optimum levels of wellness through health education/counseling.
8. Evaluate current research pertinent to secondary school students and discuss the school nurse's role in application of research findings and participation in the research process.
9. Recognize the symptoms of substance abuse, i.e., tobacco, alcohol, and drugs, and discuss the appropriate steps in counseling and the referral process.
10. Participate in health promotion and health education relating to adolescent health issues.
11. Outline the legal rights of teens and their parents surrounding issues such as birth control and pregnancy, and discuss the school nurse's legal/ethical role.
12. Recognize the ethnic makeup of the school/district, and identify common health concerns and issues of ethnic students.
13. Discuss district policies associated with adolescent health issues.
14. Discuss the importance of continuing education and professional growth as it relates to the professional image of the school nurse.
15. Discuss the Medi-Cal billing process and types of school nursing services billed.

NURS 184, Introduction to School Nursing – Scheduled Course Content, Fall

Module One

Philosophy of School Nursing * History and Current Events * Nurse Practice Act * Scope and Standards of School Nurse Practice * Legal Guidelines * Nursing Theories * District Organization * Coordinated School Health Programs * School Nurse Calendar * District Health Services * Management Process * Dimensions and Interventions

Week 1: Philosophy of school nursing; Nursing Practice Act; transitioning into school nursing; history of school nursing; current issues and future trends; organization and funding of school districts; education today; school nurse organizations; planning school year.

Week 2: Comprehensive school health programs; role of the school nurse in coordinating school health services; Neuman Systems Model, other nursing models and theories; framework for school nursing practice; impact of school nursing on student performance

Week 3: Standards of School Nursing Practice; CSNO/NASN positions statements; legal guidelines for SN practice; elements of a lawsuit; HIPAA/FERPA; Documentation in school nursing practice; the role of the health clerk in the school setting.

Week 4: Role of the school nurse in school health services; essential functions of school health services; Standard 16, program management; the management process; job satisfaction; dimensions of school nursing, primary, secondary and tertiary intervention.

Module Two

Adaptation in School Population * Safe and Healthy School Environment * Medications * School Readiness * Mandated Screening Programs * Migrant Health Issues * Injuries * Acute and Chronic Health Problems * Communicable Disease

Week 5: Role of the school nurse in disability prevention, immunization and CHDP (Child Health and Disability Prevention) compliance, referral and follow-up; evaluating kindergarten readiness; environmental safety issues; managing medication at school.

Week 6: Role of the school nurse in screening programs based on Ed code, vision, hearing, and scoliosis; diabetes II (Acanthosis Nigricans); assessment of growth and development and BMI; organizing school wide screening; case finding, assessment, referral, follow-up.

Week 7: Community connections; School Health Index; helping students and families cope with stress; SARB and school attendance; adaptation, issues related to bullying, refugee children, migrant health; cultural sensitivity; school nutrition services; dental programs.

Week 8: The role of the school nurse in managing health care; related emergencies; First Aid; chronic health conditions such as asthma, diabetes I, skin conditions, other; Pediculosis control; communicable disease prevention; and tuberculosis screening programs.

Module Three

The Nursing Process * NANDA Nursing Diagnosis * Individual Health Care Plans * Health Promotion * Health Education Programs * Cultural Differences * Poverty and Dysfunctional Families * Learning Disabilities * Child Abuse * IDEA * 504 Plans *

Week 9: The Nursing Process: NANDA Nursing Diagnosis; Individual Health Care Plans and Emergency Action Plans related to ADHD, weigh management, seizure conditions, Cystic Fibrosis, diabetes II, management of allergies, encopresis, and Sickle Cell Disease.

Week 10: Healthy People 2010; Health promotion and health education for students and staff; CDE Health Framework; National Health Education Standards; teaching attributes; developing programs, family/community involvement; use of evaluation and survey.

Week 11: Behavior issues: anxiety disorders, children with autism, school phobia and absenteeism; poverty and homelessness; children of dysfunctional families; cultural competence in school nursing; gifted and talented children; child abuse/neglect; child abuse reporting.

Week 12: Office of Civil Rights; IDEA and other laws that protecting rights of individuals with disabilities; Student Study Team; 504 Plans; health conditions that impact learning, ADHD, vision and hearing problems, severe allergies, acting out and other behavior.

Module Four

Special Education * IEP Process * Interdisciplinary Collaboration * Legal and Ethical Issues * Confidentiality * Special Ed. Screening and Assessment * Early Intervention * Specialized Physical Health Care * Supervision of Care

Week 13: Special education, IEP (Individual Education Program) process; the IEP team and interdisciplinary collaboration; Individual Health and Support Plans; SELPA (Special Education Local Planning Area); mainstreaming; families and the grieving process.

Week 14: Ethical decision making; ethical theories; legal basis for School nursing practice; SN competence and responsibility; specialized physical health care procedures; basis for training and supervision UAPs (unlicensed assistive personnel); SN role in early intervention.

Week 15: Terminology that qualifies students for services; evaluation of children with special physical health care needs; supervision of UAPs with procedures; issue related to DNAR (Do not attempt to resuscitate); infectious disease control with medically fragile children.

NURS 185, School Nurse Seminar – Scheduled Course Content, Spring

Module One

Secondary Education * Comprehensive School Health Programs * Standards of Practice * Adolescent Health Issues * Secondary Health Services * Health Promotion and Education * School Nurse Visibility * Promoting Student Academic Success.

Week 1: Meeting the educational needs of students in middle school and high school; adolescent behavior; teacher issues; overview of comprehensive school health programs; alternative education and learning; overview and future of adolescent health; professional working relationships; nourishing self.

Week 2: Coordinated school health programs; community and family involvement; adolescent health and health behavior selection process; adaptation in the school population; preventive services; standardized nursing protocols, nursing theories; role of the school nurse.

Week 3: Professional standards of practice relevant to secondary school nursing; program management; school nurses promoting student academic success in school; health promotion and disease prevention; coordinating health fairs; and promoting school nurse visibility.

Week 4: The health education process; problems confronting school health education; health education in the classroom; worksite health promotion programs; comprehensive health education model; the group process; creating and facilitating groups; faculty and board presentations; related sections of Education Code and other state codes; role of the school nurse.

Module Two

Role of the School Nurse Regarding: Meeting Adolescent Health Needs * Physical Education * Driver Training * Sports Injuries * Adolescent Nutrition * Substance Abuse * Sexually Transmitted Diseases * Teen Pregnancy and Parenting.

Week 5: Health habits of adolescents; physical education; adolescent activity and fitness; Adaptive P.E.; driver training; sports injuries; first aid for sports injuries; nutrition for teens; sports nutrition; related sections of Education Code and other state codes: role of the school nurse.

Week 6: Substance abuse: Drug, alcohol, smoking and other inhalants; factors leading to abuse; knowledge of substances and recognition of substance abuse; health education, prevention and cessation programs; related Education Codes and other state codes; role of the school nurse.

Week 7: Sexually transmitted diseases: HIV & AIDS; release and consent; community agencies and resources; related sections of Education Code and other state codes; role of the school nurse in communicable disease control, counseling, health education, and referral.

Week 8: Pregnancy and parenting teens; statistics; child abuse reporting and sexual behavior; community resources; school and community programs; related sections of Education Code and other state codes; role of the school nurse in counseling, referral, and health supervision.

Module Three

Role of the School Nurse Regarding: Adolescent Mental Health and Behavioral Issues * Suicide * Truancy and School Refusal * Sexual Harassment * Bullying and Violence * School Safety * Crisis Intervention * Racial and Ethnic Issues * Anger Management.

Week 9: Adolescent mental health: Psychosocial interviews; psychiatric problems; anxiety disorders; eating disorders; Oppositional Defiant Disorder; Schizophrenia; truancy and school refusal; family/date violence; role of school nurse.

Week 10: Emotional and behavioral issues: Self-punitive behavior; gay and lesbian youth; bullying; sexual harassment; depression, suicide; school crisis team, interventions; role of the school nurse.

Week 11: Safe schools: Crisis intervention and school site emergency management; gangs and violence; hate motivated behavior; racial and ethnic issues; anger management; role of the school nurse.

Module Four

School Nurse role regarding: School Based Clinics * Performance Evaluation * Legislative Issues * Politics 101 * Research * Grant Writing * Publishing * Legal issues * Medi- Cal Billing * Technology * quality assurance * reviewing standards * Professional Connections.

Week 12: School based clinics; links with community agencies and managed care; politics 101 for school nurses; legislative issues; defining competency in school nursing; school nurse performance evaluation.

Week 13: Benefits of research in school nursing; applying research in practice; role of the school nurse in research projects; publishing research findings; grant writing.

Week 14: Legal and ethical issues: School nursing; minor consent; suspension/ expulsion. Medi-Cal billing options: Targeted Case Management (TCM); Medi-Cal Administrative Activities (MAA); Local Educational Agency (LEA) enrollment, accountability; reinvesting funds; and school nurse role.

Week 15: Computer technology for the school nurse; quality assurance in school health; the school nurse community; reviewing standards of practice, school nursing philosophy review; professional organizations and staying connected; preparation and continued growth.

CSUF School Nurse Services Credential Program
MEMORANDUM TO PRECEPTOR

From Beverly Miller, Coordinator, SNS Credential Program

The following is specific information regarding the student's practicum experience:

Students in Nursing 186/187 are required to complete 80 or 120 hours of clinical practice in a given semester. The length of clinical practice a student completes within the semester depends on the following: Students who are currently practicing school nursing and who are enrolled in the credential program complete 80 hours; students who are not currently practicing school nursing and who are enrolled in the credential program complete 120 hours. Of those hours, students must attend a minimum of 3 district, city/county, and/or CSNO school nurse meetings (not to exceed 12 hours). With preceptor prior approval, students may also spend up to 7 hours visiting community agencies and/or community activities relative to school nursing.

Students are asked to write Student Goals and Learning Objectives reflecting areas of interest or, for those students currently practicing school nursing, those areas in which they would like to have more experience. The goal is a rounded experience in school nursing. Student Goals and Learning Objectives may be revised at mid-term, but must be accomplished by the end of the semester. Students are required to keep a clinical journal that reflects their hours and activities on a weekly basis. The clinical journal entries should be reviewed by the student's preceptor periodically and initialed by him/her at the end of the semester. Students are to mail journal entries to the clinical instructor on the dates indicated. In addition to journaling, students have other assignments, i.e., a Cross-Cultural Case Study, clinical journal questions, journal article summaries, and a student selected assignment that they should discuss with their preceptor.

Establishing and Maintaining On-Going Communications: It is important that there be good communication between the student, the preceptor, and the clinical instructor. The following guidelines have been set up to meet this need.

1. Initial email/telephone communication is to be established at the beginning of the clinical experience between the student, the preceptor and the instructor. Email addresses/phone numbers must be shared ASAP.

2. There should be ongoing communication throughout the semester between the student, preceptor and the clinical instructor regarding issues and/or problems relevant to the student's clinical experience.
3. A 3-way telephone conference or site visit is to be coordinated by the student between the student, the preceptor and the clinical instructor between week 7 and week 11 to discuss student progress. Other 3-way conferences are encouraged throughout the semester as needed to clarify issues and/or to resolve any problems.
4. For the convenience of students and preceptors, clinical instructors have posted office hours that are noted in the front of the student's syllabus.
5. Preceptors are invited to meet and network with faculty and students at the CSNO Annual Conference. A notice of meeting date, time, and place will be email to preceptors and students prior to the conference. Conference attendance is not obligatory for students.

Thank you again for agreeing to serve as a preceptor. We look forward to working with you. If you have questions regarding the program or your role, please feel free to contact me at any time. Beverly Miller, Program Coordinator, at (559) 278-6252 or email at bmiller@csufresno.edu

ROLES AND RESPONSIBILITIES

Important: Before committing yourself as a preceptor, it must be determined if a “Student Intern Agreement” exists between your school district and CSUF before school nurse students will be allowed to participate in clinical practice in your district. The student is directed to call the CSUF Contract Coordinator in the Department of Nursing at (559) 5283 to make that determination. If an agreement does not exist, the student will ask for your assistance in obtaining the name, address, fax, and phone number of the responsible person in your school district, usually the district superintendent or his/her designee, and to then share that information with the CSUF Department of Nursing. The CSUF Department of Nursing will take responsibility for contacting that responsible person and for sending the appropriate paperwork. The student’s clinical experience cannot begin until the signed agreement has been returned to CSUF. In 10-14 days after notifying the CSUF Nursing Department of the need for an agreement, students are asked to check back with the Nursing Department to confirm that one is now in place.

Preceptor Role:

1. ***Preceptor Syllabus.*** Ask the student to provide you with a copy of the *Preceptor Syllabus*. Read through it and review it with your CSUF student so each will have an understanding of the contents.
2. ***Immediate Supervisor Approval for Employee to Act as Preceptor.*** Provide your immediate supervisor with this agreement form to obtain his/her approval and signature. This signed agreement is to then be mailed or faxed to the student’s CSUF clinical instructor at (559) 278-6252 (p. 15). Student can provide you with the name of his/her clinical instructor.
3. ***Memorandum to Preceptor.*** Read the memorandum to you, the preceptor, from the CSUF SNSC program coordinator regarding particulars on student clinical practice. It is also an expression of appreciation and our sincere thanks to you for accepting the responsibility to act as a preceptor for one of our CSUF SNSC Program student. (p. 4)
4. ***Preceptor Vitae.*** Complete the preceptor vitae form (p. 16). If you have acted as a preceptor within the past 4 years and we should have a copy of your vitae on file. Ask the student to check with his/her clinical instructor to determine if one is on file. If so, it is not necessary to complete another one.
5. ***Preceptor/Student Clinical Contract.*** With the student, read carefully and sign the Preceptor/ Student Clinical Contract (p. 21). This can be mailed or faxed to the student’s clinical instructor in care of the CSUF Department of Nursing. Fax (559) 278-6360.
6. ***Initial contact between preceptor and CSUF Clinical Instructor.*** Before the student’s

clinical experience begins, it is important that communication be established between you the preceptor and the student's CSUF clinical instructor. *This initial communication is of particular importance as details regarding the student's clinical experience may need to be clarified.* To initiate communication, email your student's clinical instructor with phone numbers, when and where you can be reached, and your preferred email address. Your CSUF student can provide you with his/her instructor's name and email address.

7. **Course objectives and assignments.** Ask the student to go over the course objectives and assignments found in his/her N186 or N187 Syllabus with you in order that you will have an understanding for the assignments and when they are due. The student should also provide you with a copy of the course calendar found at the front of that syllabus.
8. **Student Goals and Learning Objectives.** Offer your student suggestions in structuring his/her Student Goals and Learning Objectives. Students are allowed to develop their goals and learning objectives unique to their own needs and based on their past experiences, however, their choices should lead to a rounded experience in school nursing. Review these periodically with your student throughout the semester (p. 18).

Note: For guidelines and a list of competencies to assist you and your student in developing Student Goals and Learning Objectives, see "Suggested Guidelines for Time Spent in Clinical Practice" (p. 20); "Preceptor Checklists" (p. 23, 25); and "Preceptor Evaluation of Student Competencies;" and "Preceptor Evaluation of Student Professional Dispositions" (pp. 27, 29).

9. **Orient and introduce your student.** Familiarize your student with the school site and community resources; introduce him/her to faculty, staff and administrators, and go over school policies, procedures, files, and forms.
10. **Act as a role model/mentor/facilitator/advocate/resource person for your student.** Plan time with the student to discuss progress and plan activities. Be available on a regular basis.
11. **Utilizing the tools and other resources.** Use the tool noted above to assisting you in facilitating your student's learning experience and in meeting his/her goals and learning objectives in a timely manner. If necessary, you may make arrangements with another qualified school nurse if specific experiences are not available at your own school site(s).
12. **Communication.** Communicate with your student's clinical instructor by telephone and/or email as necessary to discuss student progress and/or concerns. Participate with your

student in conferences with the clinical instructor, either through instructor site visits or 3-way telephone conferences for distance learners. Your student will discuss a convenient date and time with you for conferences and will contact his/her clinical instructor.

13. **Mid-term review.** Review with your student the progress he/she has made in accomplishing his/her goals and learning objectives. If necessary and with your input, your student can make changes in his/her goals and learning objectives, i.e., to better suit needed learning experiences, to change earlier objectives that were too ambitious, or if there is an interest in other areas. All goals and learning objectives should be met by the end of the semester.
14. **Completion of student's clinical experience.** At the end of your student's clinical experience, go over the "Preceptor Checklist," "Preceptor Checklist," and "Preceptor Evaluation of Student" with your student. Discuss strengths and weaknesses and any recommendations you have for continued growth for your student. Review your student "Clinical Journal" for completeness and accuracy and initial the last page.
15. **Preceptor Evaluation of Clinical Course.** Complete the "Preceptor Evaluation of Clinical Course." Your input is valuable to us for program planning. Thank you!
16. **CSNO Annual Conference.** CSUF SNSC program faculty makes an effort to meet to network with students and preceptors at the CSNO Annual Conference. You will be receiving a notice regarding date, time and place. It is not a requirement for students or preceptors to attend the conference, however, if you are planning to attend, we will look forward to meeting with you.

Note: Regarding final documents, mail to the attention of your student's instructor to the CSUF Department of Nursing, 2345 E. San Ramon Ave. M/S MH 25, Fresno, CA 93740, or fax to (559) 278-6360. The clinical instructor must receive these by the end of the semester in order for your student to receive a final grade.

Student Role

1. **Review all course materials.** Have a clear understanding of expectations.
2. **Submit documents.** Students must submit copies of the following documents your clinical instructor before starting clinical hours: Current RN license, PHN Certificate, Preliminary Credential, malpractice insurance, current CPR card, and current TB skin test.
3. **Memorandum to School Nurse Student's Supervisor.** A student who are currently employed as a school nurse should give a copy of the memorandum, "Immediate School District Supervisor/Employer of CSUF SNSC Program student" to your employer to clarify need for clinical experience away from your normal work site (p. 32, at the back of this syllabus).
4. **Selecting a preceptor.** The person students must select as a school nurse to be their preceptor who holds a clear School Nurse Services Credential and who has had five full years of school nursing experience.

Note: There must be a signed "Student Intern Agreement" between CSUF and the school district where the clinical experience will take place before a student can make final arrangements with a preceptor. Call the CSUF Contract Coordinator in the Dept. of Nursing at (559) 278-5283 to verify the existence of an agreement or to provide the name, address, and telephone number of the responsible administrator or superintendent in that school district with whom an agreement must be made. Also, before a school nurse can act in the capacity of a preceptor, his/her immediate supervisor must sign the "Immediate Supervisor Approval of Employee to Act as Preceptor" form found in this syllabus (p. 9).

5. **Preceptor vitae.** Ask your preceptor to complete the Preceptor Vitae form (p. 16) in this syllabus. If he/she has submitted a vitae for CSUF within the past 4 years, another one does not have to be completed. However, check with your clinical instructor to be sure one is on file with university.
6. **Preceptor/Student Contract.** Discuss the need for a "Preceptor/Student Clinical Contract" with your preceptor and together read, sign and date the contract (p. 21). Mail or fax it to your clinical instructor. This must be in your CUSF file before you can begin clinical hours.
7. **Initial contact between preceptor and CSUF Clinical Instructor.** Before the student's clinical experience begins, it is important that there be a contact between the preceptor and the student's CSUF clinical instructor to clarify expectations and to answer any question your preceptor may have regarding the program or the practicum. At the time that the Preceptor/Student Contract is signed, provide your preceptor with you're your CSUF clinical

instructor's name and email address so that he/she can establish communications. Your clinical instructor's email address can be found on the front page of your course syllabus.

8. **Preceptor Syllabus.** Go over the "Preceptor Syllabus" with your preceptor so that both of you have a clear understanding for your roles. Review the Preceptor Checklist in this syllabus (p.1600/18) at covers school nurse competencies.
9. **Communication.** Exchange E-mail addresses, phone numbers, site/home addresses with your preceptor and your clinical instructor ASAP. Complete the information form at the back of your N186/187 Syllabus and send it to your clinical instructor. It is most important to maintain open communications between all parties.
10. **Course objective and assignments.** When you receive you N186/187 Syllabus read through the course objectives and assignments and review them with your preceptor so the he/she will have an understanding for assignment expectations and due dates. You should also provide your preceptor with a copy of the Course Calendar found in your syllabus.
11. **Student Goals and Learning Objectives.** With input from your preceptor, develop your "Student Goals and Learning Objectives" for the semester (p. 18). Send 2 copies of these to your clinical instructor for review and give one copy to your preceptor. Your clinical instructor will return one copy to you with comments. Periodically review these with your preceptor throughout the semester. At mid-term these can be revises to better suit student needs.

Note: In developing Student Goals and Learning Objectives, take into consideration the following: "Suggested Guidelines for Time Spent in Clinical Practice," "Preceptor Checklist" and "Preceptor Evaluation of Student" found in this syllabus.

12. **Three-way Conference.** Between the 7th and 13th week of the semester, students are to coordinate a 3-way conference between themselves, their preceptor and their clinical instructor. If there are concerns or problems, this should be done ASAP. The student is to arrange a date and time when student and preceptor can be together and to then notify his/her clinical instructor. Depending on location and circumstances, the conference will be either a site visit or a 3-way telephone conference.

13. **Student responsibility during clinical experience:**

- Assume responsibility for your own learning experience.
- Become familiar with school site, administrators, faculty/staff, policies/procedures, files/forms, community agencies/resources.
- Act in a professional, ethical, responsible manner, and abide by school/agency standards.
- Complete all course objectives, individual objectives, clinical hours as agreed upon with preceptor in a timely and professional manner.

- Maintain on-going communication throughout the semester with clinical instructor via email, or other means of communication, to discuss progress, issues relating to clinical practice.
- Arrange to have a mid-term conference and final evaluation conference with preceptor.
- Contact clinical instructor promptly if unable to complete hours/assignments, with problems.

Clinical Instructor Role

1. Assist student with clinical placement or determine appropriateness of preceptor/student placement. Document that preceptor has met minimum standards for preceptors per vitae.
2. Determine that the following student documents are on file before clinical experience begins: Current RN license, Preliminary Credential, PHN or community health experience; copy of current malpractice insurance, current CPR card, and current immunizations.
3. Determine that the following signed documents are on file before clinical experience begins:
 - * University/Agency Agreement;
 - * Immediate Supervisor Approval of Employee to Act as
 - * Preceptor; preceptor vitae; and a signed Preceptor-Student Contract.
4. Monitor the student progress throughout the semester through reading clinical journals, and other written feedback; monitoring student Blackboard participation; communications such as email, telephone, office visits; and 3-way telephone and/or site visit between student, preceptor and clinical instructor.
5. Offering support and being available to preceptors through various means of communication throughout the semester.

California State University, Fresno
Department of Nursing

SCHOOL NURSE SERVICES CREDENTIAL PROGRAM

Immediate Supervisor Approval of Employee to Act as Preceptor

(Must be signed by preceptor's immediate supervisor or district administrator)

The faculty of CSUF Department of Nursing is pleased that a school nurse within your district has agreed to act as a preceptor for students in our School Nurse Services Credential program. In order to do this he/she must have your district's approval, hold a School Nurse Services Credential, and have three years of school nursing experience beyond that credential. Thank you for your consideration in this matter.

Immediate Supervisor / Administrator

I give approval on behalf of the _____
(School District Department of Health Services, other)

for _____, School nurse, to serve as a
preceptor for a student(s) in the CSUF School Nurse Services Credential Program.

Student preceptor will be supervising (Name) _____,

Note: For a school nurse to qualify as a preceptor, he/she must hold a clear School Nurse Services Credential and have been employed as a school nurse for a minimum of five (5) full years.

I have been informed that a formal agreement between the CSUF Department of Nursing and this district is in effect.

Signature _____ Date _____

Title/position _____

Address/city/zip _____

Phone number () _____ E-mail address _____

Fax completed form to:

Beverly Miller, Program, Coordinator
School Nurse Services Credential program
Fax (559) 278-6363

CSUF Department of Nursing
School Nurse Services Credential Program

PRECEPTOR VITAE

Note: For a school nurse to qualify as a preceptor, he/she must have held a clear School Nurse Services Credential and have been employed as a school nurse for a minimum of five (5) full years.

Preceptor Name _____ Date _____

School district _____

Phone () _____ E-mail _____

Address/city _____ Zip _____

School site(s) _____ Days _____ Phone () _____

_____ Days _____ Phone () _____

_____ Days _____ Phone () _____

Preceptor Address _____ Cell Ph. _____

Clear/Professional School Nurse Services Credential? Yes _____ No _____

School Audiometrist Certificate? Yes _____ No _____

California RN License # _____ Expiration Date _____

ACADEMIC PREPARATION (begin with most recent):

Institution	Degree	Date	Area of Study
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Preceptor Vitae (page 2)

PROFESSIONAL EXPERIENCE (begin with most recent):

Agency	Position	Years of Employment

PROFESSIONAL ACTIVITY (membership in professional organizations, offices held, Honors, publications, papers presented, task force membership, etc.):

Date	Organization/Activity

AREAS OF INTEREST (e.g., Teen Pregnancy, Staff Wellness, Safety Issues):

PHILOSOPHY OF SCHOOL NURSING (Briefly outline the guiding beliefs which influence the goals of your practice and delineate your professional role and code of ethics.):

MAIN OBJECTIVE OF SERVING AS A PRECEPTOR (Briefly state you motivation/goals/reasons for wanting to serve as a preceptor.):

I agree to serve as a preceptor for the CSUF School Nurse Services Credential Program for

(student's name) _____

Signed _____ **Date** _____

(Preceptor Vitae will be on file in the CSUF Nursing Office for four years)

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

CSUF PRECEPTOR / STUDENT CLINICAL CONTRACT

Student name _____ Date _____

District employed by _____ Phone _____

Worksites/weekdays/phone numbers _____

Home address/zip _____

Home phone _____ E-mail address _____

Note: Practicum hours are to be completed under the direct supervision of the preceptor and away from the student's regular work site if she/he is employed as school nurse. With approval of clinical instructor, it is permissible for the preceptor to make special arrangements for the student to work with another qualified credentialed school nurse in that same school district in order to gain experience in a specific area that the preceptor cannot offer at his/her own school site(s). Note: Practicum hours may be completed in the school district in which the student is employed.

Total number practicum hours needed by the student: 80 hours (_____) 120 hours (_____)

Site(s) of Practicum experience (include weekdays, times, addresses, phone numbers):

CSUF PRECEPTOR / STUDENT CLINICAL CONTRACT

Preceptor/Student Clinical Contract (page 2)

Preceptor name _____

School district _____

Address (work) _____

Preceptor cell phone _____ E-mail address _____

Immediate supervisor/title _____ Phone _____

Address of supervisor _____

STUDENT _____ (print/type)

I have read all course materials and plan to consult with my preceptor in the development of my Student Goals and Learning Objectives prior to beginning my practicum experience. I agree to comply with the all of the terms of this contract.

Student Signature _____ Date _____

PRECEPTOR _____ (print/type)

I have read the Preceptor Syllabus and agree to comply with the terms of this contract as outlined. I will assist my student in the development of Students Goals and Learning Objectives that will lead to a meaningful clinical experience and will mentor, supervise, and guide him/her through out this clinical experience.

Preceptor Signature _____ Date _____

CLINICAL INSTRUCTOR _____ (print/type)

I give my approval for this preceptor to precept the student named above. I have determined that all of the necessary documentation is in place and I give my approval for this student to begin his/her clinical experience. I will review this student's Student Goals and Learning Objectives for the semester and will give my approval or will notify the student of needed changes.

Clinical Instructor Signature _____ Date _____

This signed contract must to FAXED to the student's clinical instructor at 559-278-6360 before clinical practice can begin. Both preceptor and student should keep a copy of this contact.

STUDENT GOALS AND LEARNING OBJECTIVES

(Must be discussed with preceptor)

Guidelines for Student Goals and Learning Objectives

(Points value: 5 pts.)

Due with 1st Journal Entries Packet

1. Students are to write individual Student Goals and Learning Objectives, along with learning activities reflecting areas of interest. Student goals, learning objectives, and learning activities are to supplement the course objectives and assignments, and a chance for the student to personalize his/her practicum experience. Students are to discuss possible learning experiences and specific areas of interest with their preceptor. Students are to develop at least 3 global goals. For each goal, the student is to develop between 3 and 5 learning objectives and 3-5 learning activities (see example that follows) “Student Goals and Learning Objectives” are to be sent to clinical instructor for review and approval at the beginning of the student’s clinical experience.
2. To develop personal goal, objectives, and decide on learning activities, it is suggested that students and preceptors read through the following:

Suggestions: First and foremost it is important for both student and preceptor to review the *Preceptor Checklist of Competencies and Skills*, and Professional Dispositions expectations (found in this syllabus). Following this, the student is to decide on the types of clinical experiences he/she would like to have at the level in which he/she is assigned (elementary or secondary). If the student is currently practicing as a school nursing at a particular level, he/she may still have gaps in experience that need to be filled. If the student has little or no previous experience with school aged children/adolescents, it is suggested that the student spend some time broaden his/her knowledge by observing in a classroom, talking to teachers/principals/school psychologists, reviewing a district policy/procedure manual, etc. If the student has a good deal of experience at the level in which he/she is assigned, the student may want to gain expertise in specific areas of interest, i.e., specific special education programs, working with the medically fragile, in a preschool program; in a gifted and talented education program; or in a Migrant Education program. Students are encouraged to spend time visiting resources in the community, i.e., regional centers, infant stimulation programs, specialty clinics, or other programs. for students and preceptors to review the *Preceptor Checklist* and Professional Dispositions Evaluation for the appropriate level in developing goals and objectives.

3. Students are expected to review their goals/learning objectives/learning activities periodically with your preceptor and to keep their clinical instructor informed through journaling. Students are to complete a mid-term summary of goal accomplishments in preparation for a 3-way conference with their preceptor and clinical instructor. At the end of the semester, students are expected to complete a written final narrative self-evaluation of accomplishments. Students may add/modify goals and objectives at mid-term that will

lead to a better learning experience. Note: Any changes are to be discussed with the student's preceptor and the student's clinical instructor is to be notified.

:

The example relates to elementary school nursing, however, the same format is used at the secondary level (An example of secondary goals and objective is found in NURS 187 Syllabus.

Example of a goal with learning objectives, learning activities, and how to measure:

Goal 1	To gain insight into care and medical management of various health conditions and health problems seen among children at the elementary level.	
	Learning Objective	Learning Activities
	A. Describe care and medical management of three chronic health conditions associated with school-age children.	• Interview preceptor regarding types of chronic health problems seen in school in elementary school age children. • Interview my preceptor about methods of managing children with chronic health conditions in the school setting. • Assist preceptor in case management of 5 children who have chronic health conditions over a six week period.
	B. Describe care and medical management of five types of acute health conditions and/or injuries associated with school-age children.	• Interview preceptor regarding types of acute health conditions and injuries seen in school in elementary school age children. • Interview my preceptor about methods of managing children with acute health conditions and injuries in school setting. • Assist preceptor in assessing and caring for 20 children with acute health complaints coming into health office over a six week period.
	C. Describe three common conditions and/or communicable diseases that require exclusion from school to prevent spread among the school population and the management of each.	• Interview preceptor regarding types of communicable diseases or conditions observed among elementary school age children. • Interview my preceptor about methods of managing children with communicable conditions and prevention of spread to others. • Assist preceptor in screening, identifying and referring 10 children with possible communicable conditions over six week period.
How will this goal be measured to determine learning outcome?		

Note: Students who have NOT had previous experience at the elementary level in their SN practice are free to modify this example. ***School nurses with two or more years of school***

nursing experience at the elementary level are expected to be more creative in developing their Student Goals and Learning Objectives.

Note: With input from the student's preceptor, *Student Goals and Learning Objectives* should be developed in the first week of the student's clinical practice. These should be emailed to the student's clinical instructor for review and a final version sent with other module I work at the end of the fourth semester week. The student is to provide the preceptor with a copy of *Student Goals and Learning Objectives*, as well as a copy of the signed Preceptor/Student Contract which must be sent to clinical instructor prior to beginning clinical practice.

EXPERIENCED SCHOOL NURSE PRACTICUM PROJECT

The experienced school nurse project is for practicing school nurse students who have two or more full years of school nursing experience at the secondary or elementary level depending on the semester practicum. These students may choose to spend up to 20 hours of practicum time working on a special project based on a significant school nursing need in their school district, or that of their preceptor. The project must be approved by the student's preceptor and carried out within the semester under preceptor guidance. A project proposal must be written up by the student and approved and signed by the preceptor. The project proposal is then sent to the student's clinical instructor for final approval. Clinical journaling needs to reflect progress made on the project, separate from other journaling. Students are to keep the clinical instructor informed regarding hours spent and progress made on the project. On completion, the preceptor must sign off on the project. A final report with evidence of the completed project, i.e., final documentation, final product, etc. is to be sent to the clinical instructor. (Experienced SN Project Proposal form found in student N186 and N187 Syllabi.)

Note: Experienced SN Project (25% of practicum, worth 5 pts/out of 20 pts. allotted to practicum experience.)

SUGGESTED GUIDELINES FOR TIME SPENT IN CLINICAL PRACTICE
For Students new to this Particular Level of School Nursing

The following guidelines may be helpful in planning student clinical experiences for nurses who have had limited school nursing experience working with students at the elementary or secondary level depending on the semester. Note: In this program, clinical experience will be at the elementary level in the fall semester and secondary level in the spring semester.

ACTIVITY	80 HRS.	120 HRS.
Health office management/student visits to Health Office	8 to 9 hrs	14 to 16 hrs
Screening (hearing, vision, dental, scoliosis)	5 to 6 hrs	10 to 12 hrs
Immunizations (paperwork, clinics, follow-up)	4 to 6 hrs	7 to 10 hrs
Medications/special procedures	4 to 5 hrs	6 to 8 hrs
Home visits, parent contacts	3 to 4 hrs	4 to 5 hrs
Case management, chronic conditions health care/action plans	4 to 5 hrs	8 to 10 hrs
Other programs, i.e., Special Ed.	4 to 5 hrs	6 to 8 hrs
Health teaching (classroom, groups, Health Fair)	4 to 5 hrs	7 to 8 hrs
Faculty meetings and other school activities	2 to 3 hrs	5 to 6 hrs
Health assessment, health histories, IEP, 504 work-ups	6 to 7 hrs	7 to 8 hrs
Meeting attendance, SST, IEP, 504	3 to 5 hrs	5 to 7 hrs
Record keeping and report writing	3 to 4 hrs	5 to 7 hrs

For all students: Other experiences

In N186, with clearance from his/her preceptor, all students are to attend 3 *district, local and/or CSNO school nurse meetings* during the fall semester (not to exceed 12 hours).

In N187, as much as it is possible, students are to make an effort to attend at least 2 school nurse *in-services/conferences*, not simply routine SN meetings, during the semester (not to exceed 12 hours).

In N186 and N187, students must spend 6 to 8 hours in community related activities, i.e., visiting community health agencies, with emphasis on elementary school nursing in the fall and secondary school nursing in the spring, or in involved in other community/school related activities appropriate for the school nurse, i.e., SARB meetings, sports event with school nurse responsibilities, school site involving community, PTA meeting, community health screening, etc.

The remaining time must be spent at school site(s) working/observing/participating in activities under the direct supervision of their preceptor or qualified preceptor designee. For experienced school nurse students, those with two or more full years of school nursing at a given level, up to 20 hours may be spent working on a special project as noted above.

NURS 186 PRECEPTOR CHECKLIST (ELEMENTARY)

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the elementary level and explains/demonstrates to the preceptor's satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

COMPETENCIES / SKILLS													
School Nurse Competencies 1. Providing Health and Wellness Services (Primary Intervention)													
E1	Organizes and correctly performs screening for the following:							Preceptor comments and initials					
			Met				Met						
			Y	N	Date					Y	N	Date	
	Vision - near/far, color, muscle						Functional vision & hearing						
	Hearing, including thresholds						Dental						
	Nutritional Assessment						Height, Weight, BMI						
*Competency in each of the above areas must be demonstrated under observation of the preceptor.													
E2	Correctly carries out the Nursing Process in problem solving and in caring for children in the school setting, including developmental history taking												
E3	Correctly assesses pupil immunization status upon entry to kindergarten and correctly describes immunization requirements for entry into middle school. Demonstrates/explains accurately reporting requirements/written report.												
E4	Correctly assesses CHDP status at the first grade level, demonstrates understanding for follow-up and report obligation.												
E5	Demonstrates ability to develop a age appropriate lesson plan and carry out a health teach in the classroom in keeping with district policy and Ed Code.												
E6	Correctly identifies relevant community health agencies, services, and programs. Demonstrates leadership ability to assist children and families in accessing appropriate community resources.												
E7	Properly supervises medication administration by UAP (unlicensed assistive personnel).												
E8	Understands the importance of environmental safety and is able to identify environmental areas that illicit safety concerns												
E9	Discusses school wide emergency action plans related to natural disasters and steps in place for individual emergencies, threat of epidemic in community												
E10	Expresses understanding for Universal Precautions and communicable disease control district policies.												
E11	Expresses insight into the role of the SN as a participant in providing coordinated health services and school health programs to better manage limited resources.												
E12	Demonstrates ability to promote mental health among school age children and school staff through recognition of need, assessment, counseling, and referral to appropriate services.												
E13	Demonstrates ability to promote healthy nutrition and a healthy lifestyle												

	among students and staff through modeling, health promotion and health education.				
E14	Demonstrates the ability to promote oral health among school age children through participating in oral health assessment programs, through health promotion, and health education.				
E15	Describes signs of child abuse/neglect. Explains reporting guidelines, paperwork involved, and names agencies involved.				
E16	Explains the SARB process and takes the appropriate steps to follow up on absenteeism and encourage school attendance.				
E17	Makes appropriate home visit to follow up on absenteeism and/or as member of an IEP team to complete assessment. Demonstrates ability to establish rapport with family.				
E18	Describes a realistic plan for organizing and implementing an overall school health program for a traditional school year.				
E19	Describes student population in schools and insight into cultural differences. Demonstrates ability to communicate effectively with students and families of different cultural backgrounds.				

School Nurse Competencies 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)

		Met		Date	Comments/ Initials
		Y	N		
E20	Demonstrates competence in providing appropriate healthcare services to students coming to the health office and others in the school setting.				
E21	Demonstrates ability to assist in use of and/or interprets the following:				
	Asthmatic equip – inhaler, spacer, nebulizer, Peak flow meter				
	Diabetic equip – insulin syringe, insulin pump, glucometer, carb count				
	Emergency equipment, i.e. defibrillator				
	Explain if other:				
E22	Demonstrates ability to respond to emergencies involving students/staff				
		Met			
		Y	N	Date	
	Asthma attack				Insulin reaction
	Grand Mal seizure				Loss of permanent tooth
	Fracture/sprain				Eye injury
	Head injury, spinal injury				Chemical/2 nd or 3 rd degree burn
	Sickle Cell emergency				Allergic reaction
	Explain if other:				
*Competency for each (E21 and E22) must be demonstrated under direct observation by the preceptor.					
E23	Demonstrates competence in managing acute injuries and other medical emergencies, assesses, and provides appropriate emergency first aid.				
E24	Demonstrates competence in caring for students with chronic health problems, and in formulating appropriate Individual Healthcare Plans and Emergency Action Plans that ensures child safety and optimal learning.				
E25	Demonstrates competence in caring for the medically fragile and competently carries out specialized physical health care procedures, i.e., tracheostomy care, gastrostomy feedings, a clean catheterization.				
E26	Demonstrates competence in managing children identified as having a				

	communicable disease condition, makes good judgment calls in following through with school population, referral, and follow-up.					
E27	Demonstrates ability to case manage the multifaceted health care needs of a child, i.e., assists families with affordable health care and coordinating services within the school and community.					
E28	Demonstrates ability to participate as a member of the SST, IEP team and completes appropriate assessment and paperwork for an IEP and 504 plan.					
E29	Demonstrates competence in administering medication in the school setting, states 5 rights, proper storage, management, and documentation.					
E30	Describes the alarm system that signals a school wide emergency and the action steps that students and staff need to take in the event of a school wide or natural disaster, threat of an intruder, and the school nurse role.					
School Nurse Competencies 3. Professional Management Skills						
		Excellent = 5 and Poor =1				
		5	4	3	2	1
E31	Demonstrates the ability to use his/her professional knowledge and skills to promote the overall health of the school community.					
Comments:						
E32	Researches/reiterates legal guidelines, i.e., sections of Ed. Code, other state laws or federal laws as they applied to health services out by student in clinical practice.					
Comments:						
E33	Demonstrates ability to model evidence-based healthcare practices in the delivery of school nursing services (research), as well as use a theoretical base to guide practice.					
Comments:						
E34	Demonstrates the ability to advocate appropriately with students, families, community, and others to promote healthy behaviors and lifestyles.					
Comments:						
E35	Demonstrates ability to communicate with clarity and professionally, both orally and in writing, with professionals, families, and students.					
Comments:						
E36	Demonstrates ability to work in a collaborative and collegial manner with others.					
Comments:						
E37	Identifies the ethnic makeup of the school / district and provides culturally sensitive care to each child and family.					
Comments:						
E38	Demonstrates ability to organize and maintain accurate and complete health records.					

Comments:						
E39	Demonstrates the ability to use time effectively, and manage fiscal and personnel resources prudently.					
Comments:						
E40	Demonstrates the ability to train, supervise, and monitor others who may assist students in taking medication and/or provide specialized physical healthcare procedures to students.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Clinic held at school site, i.e. immunization, dental screening ☐ Community agencies, i.e. CCS, CVRC, other ☐ Faculty/school staff in-service ☐ Conducted health teaching in a classroom	☐ Infant stimulation program (0-3 years) ☐ Preschool program ☐ Student Attendance Review Board ☐ School nurse in-services, conferences

Preceptor confirmation of time spent in practicum experience at the elementary level:

Practicum time must add up to 80 hours for a student currently employed as a school nurse, 120 hours for a student not currently employed as a school nursing, 100 hours for a practicing PHN.

Please complete the following related to hours:

No. of hours spent under your direct supervision providing health services at a school site?	
No. of hours spent with your guidance in completing a leadership activity or Ex SN Project?	
No. of hours spent with your recommendation participating in community activities/SN meetings?	
Total Number of Hours	

Note: Preceptor must have approved the following student activities away from direct supervision:

- Time spent by school nurse student in a leadership activity/project not specified in Student Goals and Objectives (max. 10 hrs.)
 - An *Experienced School Nurse Project*. Preceptor must sign off on completion (max. 20 hrs). Points earned for a completed project will be determined by the student's clinical instructor following review.
 - Time spent participating in community activities, visiting agencies and/or programs (8-10 hrs.)
- School nurse workshops/conferences (10-12 hrs.)

Preceptor evaluation of student's total performance throughout clinical experience:

Taking all practicum activities into consideration, rate the total performance of this student:

	Excellent	Very Good	Good	Fair	Poor
Circle no.	5	4	3	2	1

List areas in which the student may need further mentoring/experience:

Additional comments:

Would you recommend this student for credentialing? Yes _____ No _____

Preceptor Signature _____ Date _____

Completed evaluation must be faxed or mailed to clinical instructor after a preceptor conference with student to discuss outcomes of practicum experience and before the end of the semester. Fax completed evaluation forms to the attention of the clinical instructor at (559) 278-6360; or mail to the attention of the student's clinical instructor to CSU, Fresno Dept. of Nursing, 2345 E. San Ramon Ave, M/S MH 25, Fresno, CA 93740-8031.

NURS 187 PRECEPTOR CHECKLIST (SECONDARY)

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the secondary level and explains/ demonstrates to the preceptor satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

COMPETENCIES / SKILLS					
Providing Health and Wellness Services (Primary Intervention)					
		Met		Date	Preceptor Comments and Initials
		Y	N		
S1	Correctly carries out the Nursing Process in problem solving and in caring for preadolescents/adolescent in school setting.				
S2	Demonstrates competency in planning, organizing, and conducting mass screening to detect deviations from norm related to vision, hearing, scoliosis, and Acanthosis Nigricans				
S3	Demonstrates the ability to develop age appropriate health curriculum and competently teach or facilitate a group discussion in keeping with district policy and the Ed Code.				
S4	Correctly identifies relevant community resources for adolescent population and makes appropriate referrals.				
S5	Properly trains/supervises medication administration and procedures carried out by unlicensed personnel.				
S6	Explains insight into importance of campus security and describes issues, i.e., gang activity, weapons on campus, other.				
S7	Demonstrates an understanding for emergency steps in school wide emergencies, i.e., natural disasters, bomb threat, campus intruder, epidemic				
S8	Utilizes effective communication skills and sensitivity when assisting/counseling with adolescents, families, and staff.				
S9	Identifies appropriate programs/services for students/families with special needs/problems (e.g., mental health, family planning needs, prenatal care).				
S10	Takes leadership role in assisting and referring students and families to appropriate services within the community				
S11	Demonstrates ability to promote healthy nutrition and a healthy lifestyle				

	among adolescents and staff through modeling, health promotion, and health education at the secondary level.				
S12	Discusses various health issues associated with different types of athletic activities and nutritional requirements.				
S13	Expresses insight into the role of the SN as a participant in providing coordinated health services and programs at the secondary level to better manage limited resources.				
S14	Describes at least 5 things related to organizing and implementing an overall school health program at the secondary level.				
S15	Demonstrates ability to promote mental health among adolescents and school staff through recognition of need, assessment, counseling, and referral for appropriate services.				
S16	Participates in reporting of suspected child abuse as it relates to unlawful sexual activity/abuse, including date rape. Discusses laws regarding reporting sexual activity among minors.				
S17	Describes signs and symptoms of substance abuse, assessment, reporting, and referral guidelines, and appropriate referral agencies for substance abusers and families.				
S18	Discusses issues associated with adolescent absenteeism and the role of the school nurse in preventing school drop-out. Describes various alternative programs to help teens/young adults complete schooling.				
SNC 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)					
		Met			
		Y	N		Comments
S19	Demonstrates ability to provide healthcare services to students and emergency and/or first aid assistance to others in the school setting.				
S20	Demonstrates the ability to properly evaluate and manage various types of sports injuries, including acute injuries, makes appropriate referral.				
S21	Relates insight into behavioral, emotional, and mental health issues that affect adolescents, uses appropriate counseling techniques and referrals to appropriate professional within the school and community.				
S22	Describes signs/symptoms of at least 2 types of eating disorders. Given the opportunity, demonstrates appropriate counseling techniques, contacts the correct individuals and refers appropriately.				

S23	Describes signs of depression and suicide threat. Demonstrates ability to use appropriate counseling techniques and guidelines regarding sharing confidential information in the best interest of the individual and others. Describes appropriate contacts and referral.					
S24	Demonstrates ability to counsel with pregnant teens, with knowledge of confidentiality guidelines, available programs and referral agencies and role of SN in health promotion and discouraging absenteeism.					
S25	Describes signs and symptoms of at least 3 types of substance abuse other than alcohol. Describes role of the school nurse in assessment, counseling, and referral to appropriate professionals and services.					
S26	Uses the appropriate counseling techniques with students suspected of having an STD, makes referral to appropriate community agency. Discusses issues related to spread of communicable disease.					
S27	Demonstrates ability to case manage the multifaceted health related needs of an adolescent, i.e., a pregnant teen – MediCal/insurance, affordable and appropriate healthcare and programs.					
S28	Describes role of the school nurse in making sure that students properly take/use medication how/when ordered, including self-carry.					
S29	Demonstrates understanding for needs of wheelchair bound individuals and students dependent on other types of health related equipment, i.e. access to facilities, personal assistance needs, body alignment issues.					
S30	Describes the role of the school nurse as a member of the school crisis team in planning, responding, and participating in crisis intervention.					
School Nurse Competencies 3. Professional Management Skills						
		Excellent = 5 and Poor = 1				
		5	4	3	2	1
S31	Demonstrates the ability to use his/her professional knowledge and skills to promote the overall health of the school community.					
Comments:						
S32	Demonstrates the ability to advocate appropriately with students and others in the school community to promote healthy behaviors and lifestyles among adolescents and staff at the secondary level.					
S32 Comments:						
		Excellent = 5 and Poor = 1				
		5	4	3	2	1
S33	Demonstrates the ability to model evidence-based health care practices in the delivery of school nursing services at the secondary level (research), as well as uses					

	a theoretical base to guide practice.					
Comments:						
S34	Communicate effectively in writing and can makes clear oral presentations to a wide variety of audiences.					
Comments:						
S35	Demonstrates sensitivity towards adolescent emotional, social, cultural, and developmental needs, as well as the needs of others.					
Comments:						
S36	Demonstrates understanding for legal guidelines regarding access to health records, HIPAA, FERPA, and other confidentiality matters, both written and verbal.					
Comments:						
S37	Demonstrates the ability to use time effectively, adapt to new and unanticipated situations, and to manage fiscal and personnel resources prudently.					
Comments:						
S38	Demonstrates ability to work in a collaborative and collegial manner with others at the secondary level.					
S39	Expresses understanding for what is involved in maintaining a comprehensive school health services program.					
Comments:						
S40	Demonstrates a global understanding for the role of the school nurse as it relates to school and community.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Community/juvenile court school ☐ Continuation high School ☐ Drug intervention program ☐ Health/career fair planning, participation ☐ School nurse in-services/conferences ☐ Health teaching in a classroom	☐ School nurse in-services/conferences ☐ Program for emotionally disturbed ☐ Faculty/staff in-service, School Council mtg. ☐ Student Attendance Review Board ☐ Teen pregnancy/parenting program ☐ Facilitated a small group

NURS 187, SECONDARY PRACTIUCM, Preceptor Checklist Cont.

Preceptor confirmation of time spent in practicum experience:

Note: Practicum time must add up to 80 hours for a student currently employed as a school nurse, 120 hours for a student not currently employed as a school nursing, 100 hours for a practicing PHN.

Please complete the following related to hours:

No. of hours spent under your direct supervision providing health services at a school site?	
No. of hours spent with your guidance in completing a leadership activity or Ex SN Project?	
No. of hours spent with your recommendation participating in community activities/SN meetings?	
Total Number of Hours	

Note: Preceptors must have approve the following student activities:

- Time spent by school nurse student in a leadership activity/project not specified in Student Goals and Objectives (max. 10 hrs.)
 - An *Experienced School Nurse Project* and must sign off on completion (max. 20 hrs). Points earned for a completed project will be determined by the student's clinical instructor following review.
 - Time spent participating in community activities, visiting agencies and/or programs (8-10 hrs.)
- School nurse workshops/conferences (10-12 hrs.)

Preceptor evaluation of student's total performance throughout clinical experience:

Taking all practicum activities into consideration, rate the total performance of this student:

	Excellent	Very Good	Good	Fair	Poor
Circle no.	5	4	3	2	1

List areas in which the student may need further mentoring/experience:

Additional comments:

Would you recommend this student for credentialing? Yes _____ No _____

Preceptor Signature _____ Date _____

Completed evaluation must be faxed or mailed to clinical instructor after a preceptor conference with student to discuss outcomes of practicum experience and before the end of the semester.

Fax completed evaluation forms to the attention of the clinical instructor at (559) 278-1013; or mail to the attention of the clinical instructor to CSU, Fresno Dept. of Nursing, 2345 E. San Ramon Ave, M/S MH 25, Fresno, CA 93740-8031.

N86/N187 PRECEPTOR EVALUATION OF STUDENT

PROFESSIONAL DISPOSITIONS

Student Name_____ Semester_____ Year_____

Please CIRCLE the number on scale that reflects the most accurate description of student application of dispositions. Give examples/comments in space provided. Student may help furnish examples.

1. Candidate demonstrates the ability to REFLECT. (A broad knowledge base, empathy and altruism are developed through parallel focus on experience and reflection.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

2. Candidate demonstrates CRITICAL THINKING skills. (The disposition to analyze situational context results in more informal decision-making. Credential candidates will be practiced in analyzing intra-personal, interpersonal and contextual issues in the clinical/educational setting.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

3. Candidate demonstrates ability to make ETHICAL JUDGEMENTS (Ability to make well-reasoned ethical decisions/judgments based knowledge and reflection that result in professional action)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

4. Candidate demonstrates the dispositional tendency to VALUE DIVERSITY - cultural, linguistic, cognitive, and physiological. (This disposition is critical to differentiating instruction and creating psychologically and physically safe helping/learning environments.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

5. Candidate demonstrates a COLLABORATIVE disposition. (The school nurse must collaborate/communicate meaningfully/effectively with other professionals, school site personnel, members of the community and families in order to effectively meet the health care needs of children/adolescents.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

6. Candidate demonstrates their enthusiasm for LIFE-LONG LEARNING. (Professional integrity is routed in commitment to life-long learning about one's profession and beyond.

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

Note: Dispositions reflected in clinical practice, see following page for guidelines.

This completed evaluation to be sent to clinical instructor with other evaluation forms by the end of the semester.

Suggested Situations that Reflect Dispositions in Clinical Practice

1. REFLECT
 - a. Demonstrated in deciding on Student Goals and Objectives (based on passed experiences).
 - b. Every day office situations (evidenced of reflection in decision making/problem solving).
 - c. Mid-term and Final Student Self Evaluations/Preceptor conferences (what is done, still to do).

2. CRITICAL THINKING
 - a. Every day office situations (effectively analyzes information received/related to students, families, care providers, faculty, others, and addresses issues based on that analysis.)
 - b. Nursing process/Cult. Differences Sp. Ed Case Study (analysis of data, conclusions, solutions)
 - c. Crisis intervention, emergency situations

3. ETHICAL JUDGEMENTS
 - a. Every day decisions that affect the welfare of the child.
 - b. Keeping personal opinions/judgments out of counseling and guidance
 - c. Basing decisions on standards of good nursing practice

4. VALUE DIVERSITY
 - a. Every day interaction with students/families/staff/others of a different culture/ethnicity than that of the school nurse student. Takes steps to seek help in communication/interpretation.
 - b. Health education/health promotion, altering curriculum/presentations to include appropriate cultural/ethic differences.
 - c. Students complete an in depth cultural evaluation, i.e. Cross Cultural Case Study

5. COLLABORATION
 - a. Evidence of collaboration as shown in interaction with other professionals at the school site, health care providers/agencies, families, i.e., in meeting needs of children and families.
 - b. Evidence of collaboration meeting attendance, i.e., SARB, parent meetings, meetings with other professionals, school nurse peers, community, health fairs, etc.
 - c. Conferences between preceptor, student and clinical instructor

6. LIFE-LONG LEARNING
 - a. Attendance at professional school nurse meetings, school nurse workshops, conferences
 - b. Demonstrates enthusiasm for learning through researching health problems, cultural background, other issues related to a child student is assisting.
 - c. Demonstrating an interest in professional organizations, legislation, current issues.

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program
PRECEPTOR EVALUATION OF CLINICAL COURSE
NURSING 186/187

Course _____; Semester _____; (circle) Elementary or Secondary Experience

Before responding to questions review course objectives/content in Preceptor Syllabus, pp. 5-9.

1. How pertinent is course content (current practicum level) to the school nursing experience?

Extremely Pertinent _____; Very Pertinent _____; Fairly Pertinent _____; Not Pertinent _____

Comment:

2. Are there other activities/experiences you would include?

(Keep in mind that some experiences will take place in a future or previous semester)

3. Are there activities/experiences you would eliminate?

4. What changes could be made to improve your experience as a preceptor?

Signature (optional) _____ Date _____

Thank you again for making this experience possible for this student!

Faxed completed form to Beverly Miller, Program Coordinator at (559) 278-1013

CSUF Department of Nursing
School Nurse Services Credential Program

Date _____

To: Immediate Supervisor of Employed School Nurse Services Credential Program Student

Regarding: (student) _____

The school nurse who is currently employed full-time by a school district, who has not yet completed the practicum portion of the CSUF School Nurse Services Credential program, needs the opportunity to work under the direct supervision of an experienced fully credentialed school nurse preceptor. To ensure an optimal uninterrupted learning experience, the student must spend time away from his/her own place of employment during regular school hours.

The CSUF post-baccalaureate School Nurse Services Credential Program course of study meets the educational requirements established by the CCTC (California Commission on Teacher Credentialing) for the Clear Professional School Nurse Services Credential. Nurses who currently hold a preliminary credential have five years to complete educational requirements to obtain a Clear Credential in order to continue practicing school nursing after five years.

Employed school nurse students are required to take 80 hours of practicum per semester for two semesters, elementary experience in the fall and secondary experience in the spring. That amounts to approximately six hours per week over the course of two semesters that an employed school nurse student will need to be away from his/her worksite. For a meaningful clinical experience, that should include both morning and afternoon hours. There is some flexibility in scheduling clinical hours, for example, selecting the most convenient days/times to be away from a worksite; community involvement and school nurse meetings after school hours, and some leadership roles and projects can be completed at the student's own worksite. Note: Students employed as school nurses are automatically given 40 hours credit, while those students not employed as a school nurse are required to complete 120 hours.

Thank you for working out a schedule that will meet the needs of both your school district and that of your school nurse in allowing this student the necessary time away from his/her place of employment to complete the required number of clinical hours which must be completed under the supervision of a qualified preceptor. Having a fully credentialed school nurse benefits your district and will bring assurance of ongoing qualified school nursing services.

Sincerely,

Beverly Miller, Program Coordinator

For questions contact Beverly Miller by phone at (559) 278-6252 or by E-mail at bmiller@csufresno.edu

Initiating a University – Agency Contract (Internship Agreement)

California State University, Fresno
Department of Nursing
2345 E. San Ramon Ave. M/S MH25
Fresno, CA 93740-8031
Phone: 559-278-2041
Fax: 559-278-6360

INITIATING A UNIVERSITY & AGENCY AGREEMENT

(Student Intern Agreement)

Date: _____

STUDENT INFORMATION

Student Name: _____ Student ID: _____

Address: _____

City State Zip

Phone: _____ Email: _____

Semester: _____ (circle program) BSN RN-BSN MSN School Nurse Credential

PRECEPTOR INFORMATION

Preceptor: _____ (circle one) RN MD MSN NP School Nurse

Phone: _____ Fax: _____ Email: _____

Contact Person (signing agreement): _____

Phone: _____ Fax: _____ Email: _____

Agency (School District/COE): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

This form **MUST** be completed before contacting the Department of Nursing for contract agreement process. Contracts can take up to a month or longer to be processed. If you have any questions regarding contracts (pending, active, or new) please contact the Department of Nursing at (559) 278-2041.



INITIATING A UNIVERSITY & AGENCY AGREEMENT (p. 2)

Steps to Obtaining a University/Agency Agreement

1. Find a qualified preceptor with whom you can work.
2. Contact the Contract Coordinator at (559) 278-5283 to see if there is a current University/Agency agreement in place with that agency.
3. If there is not a current agreement in place, complete the information requested on the first page and mail, fax, or return the completed form in person to the Contract Coordinator in the CSU Fresno Department of Nursing.

Note: Be sure that all of the requested information is on the form.

4. Once the agreement has been created by the Contract Coordinator it will be sent to the contact person at that agency for the appropriate signature.
5. The contact person at that agency will need to return the signed agreement to the Contract Coordinator in the CSU, Fresno Department of Nursing.
6. Once the signed agreement has been returned to the CSU Fresno Contract Coordinator, it will be sent to CSU Fresno Director of Procurement & Support Services, Risk Manager of Environmental Health & Safety, and the Chair of the Department of Nursing for signatures.
7. After the agreement has been signed by all three parties, a copy will be sent back to the agency and the student may begin his/her practicum experience.

***Note-** Please allow at least one month for the contract to be finalized. The university also accepts the agency's own contract, but this may take longer (2-6 months) for processing. If an agency contract/agreement is to be used, the contact person at that agency will need to send that contract/agreement to the attention of:

Contract Coordinator
CSU Fresno Department of Nursing
2345 E. San Ramon Ave. MS MH 25
Fresno, CA 93740-8031

If the agency contract is used, there must be a place for three (3) signatures for the following CSU Fresno responsible parties:

Margie Phillips
Director, Procurement & Support Services

Dr. Michael Russler
Chair, Department of Nursing

Steve Martinez, Risk Manager, Environmental Health & Safety

SECTION FOUR

ASSESSMENT

Pre-Post Phase II

Knowledge Base Questionnaire

2008-2009 & 2009-2010

Includes:

(1) Survey and (2) Statistical Analysis

For this assessment, candidates are asked to rate their global knowledge of school nursing and school nursing skills and competencies on a 5 point Likert scale. The questionnaire consists of 26 subject areas with specific questions relevant to each subject area This Pre-Assessment is completed by candidates prior to beginning core school nurse courses and the Post-Assessment is completed following completion of core school nurse courses. . This pre-post assessment gives faculty insight into learning outcomes and areas in the curriculum and clinical experience that need further strengthening.

1. SURVEY

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

KNOWLEDGE BASE QUESTIONNAIRE 2009-2010

Student Name:	Semester and Year

(Check one of the following)

____PRE-PROGRAM QUESTIONNAIRE ____POST PROGRAM QUESTIONNAIRE

Please rate your level of knowledge/skill on a scale of 1 to 5 in the box to the right
(1 = None, 2 = Poor, 3 = Fair, 4 = Good: 5 = Excellent)

Assessment Questions

1.	Philosophy of School Nursing	
a.	Personal understanding of function and role of the school nurse	
b.	CA School Nurse Organization, philosophy, contributions to school nursing	
c.	National Association of School Nursing, philosophy, contributions to school nursing	
2.	History/Future of School Nursing	
a.	School nurse role development	
b.	History and future issues in school nursing	
c.	Role of the school nurse practitioner	
3.	Current Issues n Education	
a.	Understanding for how school nurse fits into educational setting	
b.	Knowledge of political issues related to education	
c.	Insight into school-linked, school based health services	
d.	Knowledge of budget issues/organization of school districts	
e.	Insight into working with school boards/administrations	
4.	Coordinated School Health Programs	
a.	What a comprehensive school health program entails	
b.	Insight into planning the school nurse's school year	
c.	Integrating health education into the educational picture	
d.	School based clinics, management and services	
5.	Standards of School Nursing Practice	
a.	The Nursing Practice Act in the school setting	
b.	Professional Standards of School Nursing practice	

c.	California law related to school nursing practice	
d.	School district policies and their development	
6.	Nursing Models/Theories	
a.	Basic principles of Betty Neuman's Systems Model	
b.	Application of Betty Neuman's Model in school nursing practice	
c.	Dorothea Orem's Theory Applied in Ambulatory Setting	
d.	The Roy Adaption Model in the school setting	
1.	Families at Risk	
a.	Work experience with families with multiple problems	
b.	Articles/literature related to families at risk, resiliency	
c.	Empowerment strategies for families	
d.	Issues related to poverty and homelessness	
8.	Cultural Tools/Assessment/Concepts	
a.	Experience working with multicultural populations	
b.	Leininger's Multicultural Model	
c.	Articles/literature related to multicultural differences	
9.	Gifted and Talented Children	
a.	Current information on assessment/problems of gifted	
b.	Experience working with gifted children	
c.	Health problems associated with gifted children	
10.	School Phobia/School Refusal	
a.	Current information/knowledge on assessment/problems	
b.	Work experience with children who exhibit school phobia	
11.	Learning Disabilities	
a.	Current information on symptoms/diagnosis/treatment	
b.	Nursing assessment of learning disabled children	
c.	Experience working with learning disabled children	
12.	Attention Deficit Disorders	
a.	Current research/information on ADD, ADHD	
b.	Current medication/treatment regimens	
c.	Experience in the management of children with ADD, ADHD	
13.	Drug-Exposed Infants	
a.	Current information for implications related to learning	
b.	Experience working with prenatal exposed children	
14.	Neurological Screening Tests	
a.	Insight into methods used in testing/screening for problems	

b.	Administration of school readiness tests, i.e. Denver Developmental	
c.	Administration of another type(s) of tests, i.e. neurological screening tests	
d.	Write up/presentation of results of test to Student Study Team	
15.	Legal/Ethical Issues	
a.	Knowledge of liability issues in school nursing practice	
b.	Ethical issues r/t records, confidentiality, other	
c.	Policies/Procedures in school districts	
d.	Conflict between laws relating to health and education	
e.	Supervision of UAP (Unlicensed Assistive Personnel)	
f.	Laws relating to care of minors	
g.	Laws relating to education on reproductive issues	
h.	Ethical/legal issues relating to "Do Not Attempt to Resuscitate"	
16.	Child Abuse	
a.	Reporting laws r/t who reports, what, when, to whom	
b.	Reporting laws specific to sexual activities of minors	
c.	Signs/symptoms of abuse/follow-up	
d.	Prevention of child abuse	
17.	Violence	
a.	Spousal/dating relationships/domestic abuse	
b.	School violence/weapons	
c.	Health education/prevention of violence/bullying	
18.	Health Promotion	
a.	Health fairs/community involvement in health education	
b.	Employee wellness programs	
c.	Teaching/learning theories	
d.	Health Framework/Health Ed. Standards for CA Public schools	
19.	Children with Special Needs	
a.	Asthma management, medications, inhalers, Peak Flow Meters	
b.	Diabetes management in school, pumps, meters, administration of insulin	
c.	Management of seizures in the school setting	
d.	Experience working with handicapped and special equipment	
e.	Knowledge of genetic disorders and impact on education	
f.	Healthcare Plans/Emergency Action Plans	
g.	Delegation of care	
20.	Children with Psychiatric/Behavior Problems	
a.	Knowledge of psychiatric problems affecting children/adolescents	
b.	Experience with working with children with these problems	

21.	Special Education	
a.	IEP (Individual Education Plan) meetings, assessment	
b.	Laws r/t special education	
c.	“Green Book” and other resources r/t spec. healthcare procedures	
d.	Section 504, school nurse role	
e.	Early intervention/family services	
f.	Individual Health and Support Plans (IHSP)	
g.	Specialized Physical Health Care Procedures	
h.	SELPA, definition and role	
22.	Environmental Safety	
a.	Schoolyard safety	
b.	High school safety issues	
c.	Health issues relating to lead, Asbestos, and mold	
d.	OSHA, role of the schools and community	
23.	State Mandated Screening	
a.	Laws relating to vision, hearing, and Scoliosis screening	
	Vision testing experience:	
b.	Distance vision screening	
c.	Near vision screening	
d.	Muscle balance screening	
e.	Color vision screening	
	Hearing screening and Threshold testing:	
f.	Skill with Otoscope/Tympanometry	
g.	Referral process/follow-up	
h.	Scoliosis screening	
i.	Diabetes II screening (Acanthosis Nigricans)	
j.	Height/Weight body mass index	
k.	Required State reporting on mandated screening	
24.	Immunization Requirement	
a.	Immunization Mandates	
b.	Insight into CSIR (California State Immunization Record)	
c.	TB skin testing requirements for enrollment into schools	
d.	Insight into immunization report as required by county/state	
25.	CHDP (Child Health and Disability Program)	
a.	Scope of program	
b.	1 st grade physicals requirement and timelines	
c.	Annual report on CHDP physicals	
26.	Other	
a.	Case-management techniques	

b.	Children of alcoholics	
c.	Community programs and for families/children	
d.	Computer programs in the Health Office	
e.	Crisis intervention in the school setting	
f.	CTA (California Teacher's Association)	
g.	Disaster preparedness in the school setting	
h.	District organization and funding sources	
i.	Drug abuse among adolescents	
j.	Grant writing/funding sources for research and programs	
k.	Medi-Cal billing/reimbursement	
l.	Nutrition Assessment (growth charts/calipers)	
m.	Pediculosis/Scabies	
n.	Preschool assessment	
o.	PTA (Parent and Teacher Association)	
p.	Research and its importance and impact on school nursing	
q.	SARB (Student Attendance Review Board)	
r.	School nurses as program managers in the school setting	
s.	Separation & loss, impact on children/adolescents/families	
t.	Sports injuries, emergency measures and treatment	
u.	STDs (Sexually Transmitted Diseases)	
v.	Teen Pregnancy programs	

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

(To be completed with Post Program Assessment Questionnaire)

List the topics/experiences covered in this program that were most beneficial to you in your school nursing practice. Rate them according to value (1 = least important, 4 = most important.

List other topics you would like to see covered in this program. Rate them according to interest (1 = least interested, 4= most interested).

Thank you! Your responses will be very valuable in planning for this program.

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

Information required for a Post-Program Survey:

Graduates are asked to share the following information so that a survey can be sent out in one year to employers asking them if the program adequately prepared the graduate to fill the role of the professional school nurse. It is NOT an evaluation of the graduate. This information is required by the California Commission on Teacher Credentialing to determine the program's effectiveness. No names are asked for, just comments on the effectiveness of the program.

Name and mailing address of a Principal of a school site at which you practice nursing:

Name and mailing address of the Director of Health Services:

Your own mailing address:

Note: Your address is needed as you will also be sent a survey asking you have how well you feel that the program has prepared you to practice school nursing. You will also be sent a copy of the survey that will be received by your employer.

Thank you for sharing this information which is valuable to maintaining a quality program.

Bev Miller, Program Coordinator

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

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Note: Your address is needed as you will also be sent a survey asking you how well you feel that the program has prepared you to practice school nursing. You will also be sent a copy of the survey that will be received by your employer.

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Bev Miller, Program Coordinator

2. ANALYSIS OF DATA

KNOWLEDGE BASE QUESTIONNAIRE, PRE-POST PROGRAM PHASE II

Two cohorts of students in the SNSCP (2008-2009, 2009-2010) completed questionnaires designed to evaluate their knowledge of program content prior to taking courses and immediately after completing the course work. The purposes of this approach to program evaluation were to determine whether the program is addressing the needs of school nurse practitioners, whether as a result of the program participants showed gains in their knowledge levels, and whether these pre and post knowledge levels differed for nurses depending on how much school nurse experience they reported. Participants rated their level of knowledge of all content elements (128) in the program courses before and after the program by rating their knowledge of each element using a Likert-type scale of 1(no knowledge) to 5 (very knowledgeable). A total of 59 participants had complete pre and post questionnaires. All participants were female, all resided in California, representing 24 of the State's 58 counties. Program participants were from the southern-most San Diego County to as far north as Butte County. The majority of participants were from counties in California's Central Valley. Seventy percent of participants were Caucasian, with the second largest groups Asian (12%) and Hispanic (12%). The majority of participants were married (82.5%) and were not enrolled in the CSUF MS/PN program (89.5%). The participants reported being in the following age ranges: 26-35 (16%), 36-45 (27%) 46-55 (48%), and 56 or older (9%).

Regarding the prior knowledge and knowledge gained by participants, for all 128 items, the pre-assessment mean scores were lower (indicating less knowledge) than the post-assessment scores (indicating knowledge gain). In no cases did all the participants rate themselves very knowledgeable (5 on the rating scale) of the topic prior to the program courses. In other words, no individual item prior to the course delivery had a mean rating of 5.0, suggesting that no content was included in the program that was already well known by all participants.

For group comparisons, the 128 items were grouped according to the categories in which they were initially clustered, resulting in 26 clusters of content (see instrument). Figure 1 shows the mean responses by content cluster for the pre and post instruments. In all cases, using dependent samples t-tests, the gains in reported knowledge levels were statistically significant at the $p < .001$ level. As can be seen on Figure 1, Participants started the program least knowledgeable about Content Cluster 10 (School phobia/school refusal) and Content Cluster 14 (Neurological screening tests). The gains in these two content areas were good, but remained the lowest areas in the post knowledge assessment as well. However, the post ratings were at or near the range of very good knowledge levels on the five-point rating scale. Participants started with the greatest knowledge in Content Clusters 16 (Child abuse), 23 (State mandated screening), and 24 (Immunization requirements). Nevertheless, significant gains in these three content clusters were made as a result of the program courses.

**CSUF School Nurse Services Credential Program
PRE-PROGRAM ASSESSMENT DEMOGRAPHICS SECTION**

Name (or I.D. No.)	Phase II entry date

(Check appropriate box)

27. Years of School Nursing Practice

0	1	2	3	4 or more

28. Age:

20-29	30-39	40-49	50 +

29. Sex:

Male	Female

30. Ethnicity:

American Indian/Alaskan Native	Asian/Pacific Islander	African American	Hispanic	White	Other

31. Marital Status

Single	Married	Divorced	Widowed

33. While pursuing your credential or graduate degree

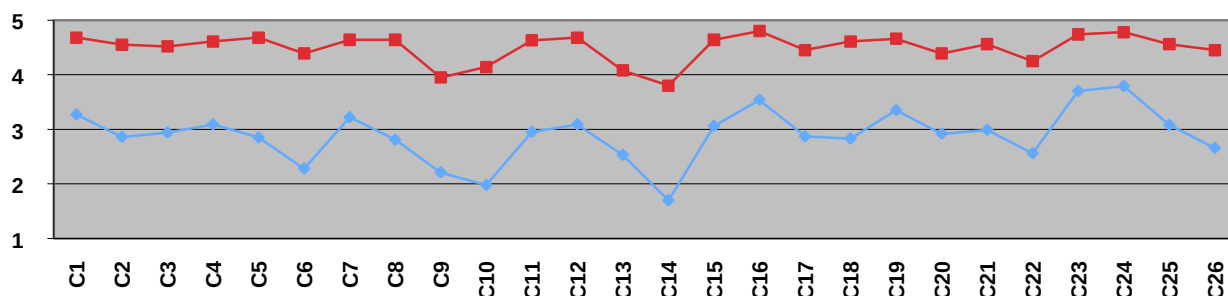
Worked full-time	Worked part-time	Did not work

32. Please identify county of residence and state:

County:	State:

Thank you for your valuable time in answering these questions! Your responses will be very valuable in planning for this program.

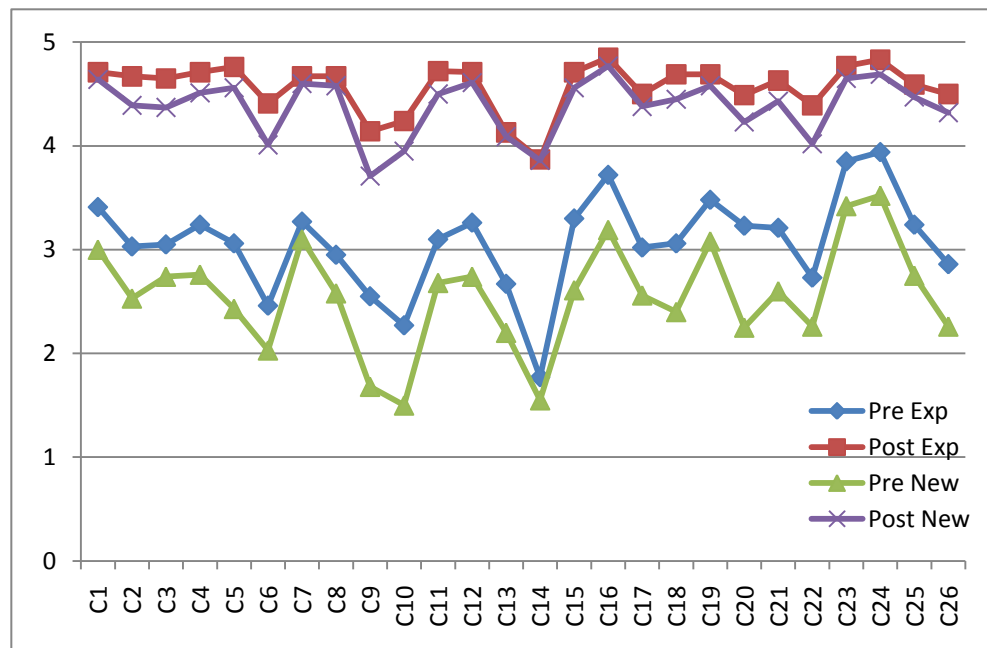
Figure 1. Mean Responses Pre (red) and Post (blue) by Content Cluster



Regarding experience in school nursing, it should be kept in mind that many of the participants may have been practicing nursing in other areas than school nursing prior to enrolling in this program. Therefore, reported years in school nursing may underestimate their total nursing experience and knowledge gained from other areas of practice. Those with 0 years (one person, 1.8%), just started as a school nurse. One year of experience was reported by 15.8%, two years by 21.1%, three years by 31.6%, and four or more years by 29.8%.

The relationship between years of school nursing experience and prior knowledge of the program was considered by comparing responses on the content clusters. Approximately 40% of participants had two or fewer years of school nursing experience and 60% reported three or more years of experience. In all content clusters, both pre and post, the more experienced group (3 or more years) rated their content knowledge higher than did the less experienced group (two or fewer years). See Figure 2. However, although the more experienced group started the program statistically significantly higher on only 12 (clusters 2, 4, 5, 9, 10, 12, 15, 16, 18, 20, 21, 26) of the 26 clusters, at the end of the course, they rated their knowledge higher than the less experienced group on only 3 of the content clusters (clusters 3, 9, 22). In other words, the program content and presentation were effective in making the two groups more equal in their knowledge than they were prior to starting the program. On only one content cluster (9, Gifted and Talented Children) did the more experienced group start with significantly greater self-reported knowledge and also complete the program with significantly greater self-reported knowledge.

Figure 2. Comparison of Pre and Post Content Cluster Means by Level of Experience.



Considering the overall grand mean of all 128 items on the knowledge survey, the post knowledge level was significantly higher than the pre knowledge level (see Figure 3). The pre knowledge grand mean was 2.88 (SD .69) on the five-point scale, and the post grand mean was 4.50 (SD .37) ($t = -17.35$, $p < .001$). Comparing the grand means for the experienced and less experienced school nurses, the same overall pattern was found: post grand means were significantly higher than pre grand means. See Table 1 for a summary of these data.

Figure 3 Comparison of Grand Means for total group and by experience level.

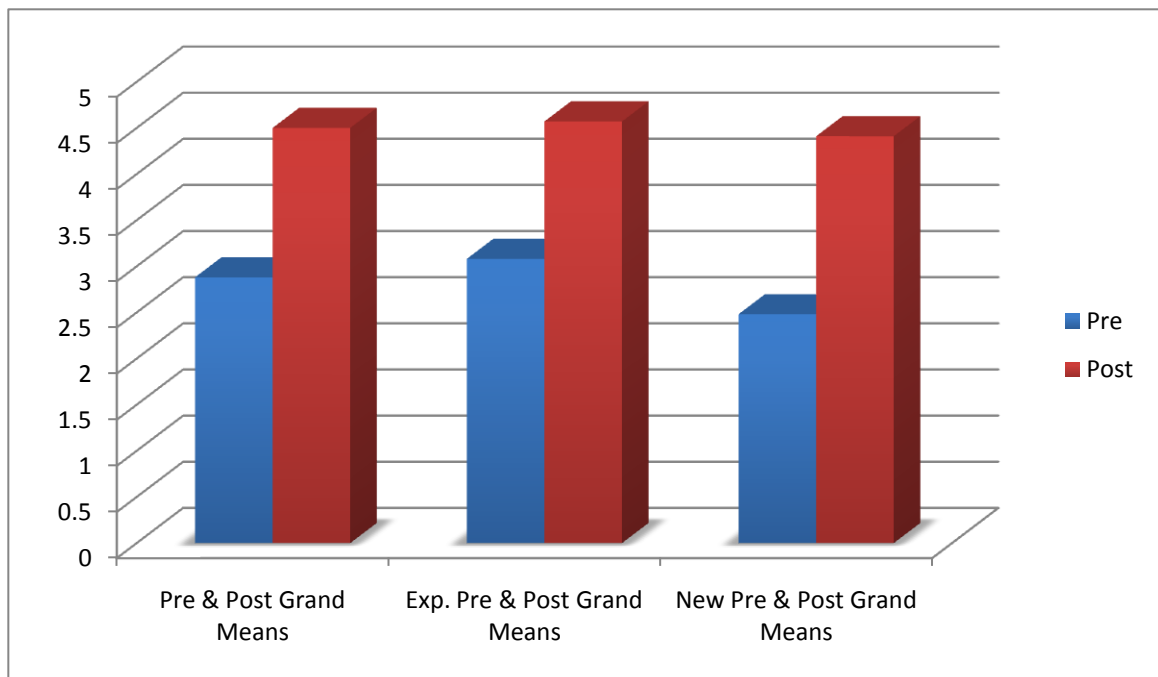


Table 1. Grand means compared using t-tests.

Grand Means	Pre (SD)	Post (SD)	t	p
Total Group	2.88 (.69)	4.50 (.37)	-17.35	p<.001
Experienced	3.08 (.71)	4.57 (.31)	-12.80	p<.001
New	2.48 (.47)	4.41 (.46)	-14.17	p<.001

A final analysis was done comparing the experienced and new (inexperienced) school nurses' pre and post grand means. See Figure 3 for a visual comparison of their grand means. Although the experienced group grand mean (3.07) was significantly higher than the new group grand mean (2.50) ($t=-3.28$, $p=.002$), The experienced (4.57) and new groups (4.37) were not statistically significantly different on their post grand means ($t= -1.86$, $p=.07$). In other words, these data support what was reported in Figure 2 regarding the differences in the two groups at the beginning of the program (experienced school nurses had more knowledge), but at the end of the program, experienced and new school nurses were not significantly different in their knowledge levels. These results provide further evidence of the program content and delivery effectiveness.

Participants were also asked to provide feedback on the most beneficial aspects of the program content. A quick content analysis of participant comments indicated that they found legal and ethical issues, laws, mandates, policy information, and current issues in education as most beneficial. In addition, participants were asked to list other topics they felt should be covered in the course. The majority of participants left this section blank or indicated that the program content covered everything they could think of. The suggestions that were made by participants for topics to be included are being reviewed by program faculty to determine whether the suggested content had actually been included, needed to be expanded, or was missing from the courses. This information will be used to inform program faculty when they review and update the content of the program.

School Nurse Services Credential Program
2008-2009 and 2009-2010
POST KNOWLEDGE BASE ASSESSMENT COMMENTS BY CANDIDATES

Faculty response after reviewing candidates' comments regarding subject matter and/or clinical experiences that they would like to see covered in the program.	
Reported as Most beneficial Number following topic = no. of candidates reporting	Like to See Covered
Attending school nurse meeting and conferences Attention Deficit Hyperactive disorder (1) Adolescent health issues, includes mental health (5) Blackboard presentations (1) Bullying issues and SN responsibility (1) CA Health Framework (1) Case management (2) Child abuse issues (1) Children with special needs (11) Clinical hours (1) Communicable Disease Control (2) Community programs and involvement (3) Coordinated school health programs (7) Counseling Techniques (1) CSNO/NASN, learning about organizations (4) Cultural issues and differences (6) Current issues in education (3) District funding (1) Education Code and other laws (16) Emotional disturbance, school refusal (1) Ethical dilemmas (1) Evidence based practice (1) Families at risk (3) Health care plans, IHPs (1) Health curriculum review (1) Health Education standards (1) Health promotion (9) Home visits (2) Health teaching (2) IEP, Individual Education Planning experience (12) Interdisciplinary paper (1) Issues related to secondary school nursing practice (2) Laws related to IDEA, HIPAA, FERPA (1) Laws related to special education (5) Learning disabilities (2) Legal issues in school nursing practice (21) Legal process (2) Legislative paper assignment (2)	Note: • If already addresses in the program, note * • If experience relates to candidate choice with goals and objectives in practicum, see ** • If subject matter may need further emphasis in program, see *** • If subject matter is not a program responsibility, see **** ****Implementing research project **Meeting with city officials to discuss task force ****preventing gang related activities ****Strategic and financial planning ***Non-traditional education *Litigation protective measures ****Tips on communicating with teachers/admin. ***Working with illegal immigrants - resources *Scholarship availability **Writing a "short IHP (samples other than book) ***Support groups for drug/alcohol dependent teens, e.g. AA, Cocaine Anonymous, Al-Anon, Nar-Anon ****Specialized procedures ***Neurologic testing/other tests ***Dealing with noncompliant parents *Ways to prioritize your time and become more efficient ***Best practice in case management *Time management: juggling multiple schools ****How to get other organizations to teach for you ***More emphasis on mental health issues/at risk *More on eating disorders in adolescents ***Increasing parent involvement and responsibility ***How the SN deals with the death of a student ***Understanding the RIF process *Pandemics ***More in depth regarding gifted and talented students

Managing unlicensed assistive personnel (1) Medi-Cal billing (2) Mental health issues, elementary and secondary (3) Middle school experience (1) Networking with fellow classmates (4) Newsletter assignment (1) Organization and documentation (1) Policies and procedures (1) Preceptor experience (1) Promoting the image of school nursing (1) Resource articles (1) Risky behavior and substance abuse (4) Role of the school nurse (4) SARB – School Attendance Board Review (5) School nurse leadership development (1) School nursing parameters (1) Scoliosis issues and screening experience (1) Screening for Acanthosis Nigricans (diabetes II) (1) Sexually transmitted diseases (1) Small group facilitating activity/assignment (1) Special Ed. Experience (7) Standards of School Nursing Practice (10) State mandated screening techniques (8) Secondary school nursing practice (3) Secondary school violence issues (1) Sports injuries (2) Sun Wise program implementation (1) Teaching anti-tobacco curriculum (1) Teen legal rights (3) Teen pregnancy issues and programs (6) Websites (2)	The topics that have 3 asterisks (***) are topics that faculty will discuss plans to incorporating these topics into clinical discussions in practicum courses. Note: Neurological screening (QNST/Denver Developmental) has been offered in a separate one unit course as an elective in previous years during summer sessions. Due to lack of enrollment numbers in recent classes, courses needed to be cancelled. Faculty believes that knowledge of neurological screening skills is important in school nursing practice. For this reason faculty will be discussing ways in which to offer a workshop or to incorporate neurological screening skills into core school nurse courses in the near future.

NURS 186/NURS 187

Preceptor Checklists of

Skills and Competencies

2009-2010

Includes:

(1) Evaluation Tool and (2) Data Analysis

This assessment tool on clinical competencies is specifically based on 2007 CCTC school nurse competencies: SNC 1, Providing health and wellness services; SNC 2, Providing direct client care services (primary, secondary, tertiary intervention); SNC 3, Professional Management Skills. Competencies under each of these categories must be checked off by the candidate's preceptor as being "met." If "unmet," an explanation by the preceptor is required.

This tool is not only used to assess candidate competencies, but to also assist the preceptor as a guide in mentoring the candidate throughout practicum experience. The preceptor is required to meet with the candidate prior to the end of the semester to discuss accomplishments, strengths and areas of need. The preceptor is then asked to complete and sign the evaluation form and to submit it to clinical instructor at the end of the semester before a final grade can be issued to the candidate.

1. EVALUATION TOOL - ELEMENTARY

N186 PRECEPTOR CHECKLIST OF SKILLS AND COMPETENCIES -ELEMENTARY

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the elementary level and explains/demonstrates to the preceptor's satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

School Nurse Competencies 1. Providing Health and Wellness Services (Primary Intervention)									
E1	Organizes and correctly performs screening for the following:								
	Met			Met			Comment if not met		
	Y	N	Date	Y	N	Date	Preceptor initials		
Vision - near/far, color, muscle				Functional vision & hearing					
Hearing, including thresholds				Dental					
Nutritional Assessment				Height, Weight, BMI					
*Competency in each of the above areas must be demonstrated under direct observation the preceptor.									
E2	Correctly carries out the Nursing Process in problem solving matters related to program; and in health assessment of clients, which includes developmental history taking, assessment of growth & development, nutritional status, etc.								
E3	Correctly assesses pupil immunization status upon entry to kindergarten and correctly describes immunization requirements for entry into middle school. Demonstrates/explains accurately reporting requirements/written report.								
E4	Correctly assesses CHDP status at the first grade level, demonstrates understanding for follow-up and report obligation.								
E5	Demonstrates ability to develop an age appropriate lesson plan and carry out a health teach in the classroom in keeping with district policy and Ed Code.								
E6	Correctly identifies relevant community health agencies, services, and programs. Demonstrates leadership ability to assist children and families in accessing appropriate community resources.								
E7	Assists with and/or properly trains and supervises medication administration and permissible tasks and procedures by UAPs (unlicensed assistive personnel).								
E8	Discusses the importance of environmental safety and is able to identify environmental areas that illicit safety concerns. Describes emergency steps taken in the event of a violent incident or an intruder on the school grounds,								
E9	Describes the emergency steps that the school site in the event of a serious personal injury, i.e., instructions, directing emergency equipment, information that needs to accompany injured party(s), role of the school nurse.								
E10	Expresses understanding for Universal Precautions and communicable disease control district policies.								
E11	Expresses insight into the role of the SN as a participant in providing coordinated health services and school health programs to better manage limited resources.								
E12	Demonstrates ability to promote mental health among school age children and school staff through recognition of need, assessment, counseling, health education, and referral to appropriate services.								
E13	Demonstrates ability to promote healthy nutrition and a healthy lifestyle among students and staff through modeling, health promotion and health education.								
E14	Demonstrates the ability to promote oral health among school age children through participating in oral health assessment programs, through health promotion, and health education.								
E15	Describes signs of child abuse/neglect. Explains reporting guidelines, paperwork involved, and names agencies involved.								
E16	Explains the SARB process and takes the appropriate steps to follows up on absenteeism and encourage school attendance.								

E17	Makes appropriate home visit to follow up on absenteeism and/or as member of an IEP team to complete assessment. Demonstrates ability to establish rapport with family.				
E18	Demonstrates sensitivity and understanding with regard to cultural differences among the student population, communicates and counsels effectively with individual students from various cultural backgrounds.				
E19	Describes the socio cultural and ethnic differences in the student population and is able to link tendency for certain health problems to individual groups.				
School Nurse Competencies 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)					
		Met			
		Y	N	Date	Comments/ Initials
E20	Demonstrates competence in providing appropriate healthcare services to students coming to the health office and others in the school setting.				
E21	Demonstrates ability to assist in use of and/or interprets the following:				
	Asthmatic equip – inhaler, spacer, nebulizer, Peak flow meter				
	Diabetic equip – insulin syringe, insulin pump, glucometer, carb counting				
	Emergency equipment, i.e. defibrillator				
	Explain if other:				
E22	Demonstrates ability to respond to emergencies involving students/staff				
		Met			
		Y	N	Date	
	Asthma attack				Insulin reaction
	Grand Mal seizure				Loss of permanent tooth
	Fracture/sprain				Eye injury
	Head injury, spinal injury				Chemical/2 nd or 3 rd degree burn
	Sickle Cell emergency				Allergic reaction
	Explain if other:				
*Competency for each (E21 and E22) must be demonstrated under direct observation by the preceptor.					
E23	Demonstrates competence in managing acute injuries and other medical emergencies; assesses and provides appropriate emergency first aid.				
E24	Demonstrates competence in caring for students with chronic health problems, and in formulating appropriate Individual Healthcare Plans and Emergency Action Plans that ensures child safety and optimal learning.				
E25	Demonstrates competence in caring for the medically fragile and competently carries out specialized physical health care procedures, i.e., tracheostomy care, gastrostomy feedings, a clean catheterization.				
E26	Demonstrates competence in managing children identified as having a communicable disease condition, makes good judgment calls in following through with school population, referral, and follow-up.				
E27	Demonstrates ability to case manage the multifaceted health care needs of a child, i.e., assists families with affordable health care and coordinating services within the school and community.				
E28	Demonstrates ability to participate as a member of the SST, IEP team and completes appropriate assessment and paperwork for an IEP and 504 plan.				
E29	Demonstrates competence in administering medication in the school setting, states 5 rights, proper storage, management, and documentation.				
E30	Describes the alarm system that signals a school wide emergency and the action steps that students and staff need to take in the event of a school wide or natural disaster, threat of an intruder, and the school nurse role.				
Comments:					

School Nurse Competencies 3. Professional Management Skills						
		Excellent = 5 and Poor =1				
		5	4	3	2	1
E31	Demonstrates leadership and the ability to use professional knowledge, skills, and ethical decision making to promote the overall health of the school community and of individuals.					
Comments:						
E32	Describes a realistic plan for organizing and implementing an overall school health program that considers uniqueness of population and cultural differences.					
Comments:						
E33	Reiterates (give examples of) legal guidelines of school nursing practice, i.e., sections of Ed. Code, other state and federal laws as they applied to health services, program planning, health promotion and teaching.					
Comments:						
E34	Demonstrates ability to model evidence-based healthcare practices in the delivery of school nursing services (research), as well as use a theoretical base to guide practice.					
Comments:						
E35	Demonstrates the ability to advocate appropriately with students, families, community, and others to promote healthy behaviors and lifestyles.					
Comments:						
E36	Demonstrates ability to communicate with clarity and professionally, both orally and in writing, with professionals, families, and students.					
Comments:						
E37	Demonstrates ability to work in a collaborative and collegial manner with others in a public education system, with understanding for the structure and authority of school district administration.					
Comments:						
E38	Demonstrates ability to organize and maintain accurate and complete health records.					
Comments:						
E39	Demonstrates the ability to use time effectively, and manage fiscal and personnel resources prudently.					
Comments:						
E40	Demonstrates the ability to train, supervise, and monitor others who may assist students in taking medication and/or provide specialized physical healthcare procedures to students.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Clinic held at school site, i.e. immunization, dental screening	☐ Infant stimulation program (0-3 years)
☐ Community agencies, i.e. CCS, CVRC, other	☐ Preschool program
☐ Faculty/school staff in-service	☐ Student Attendance Review Board
☐ Conducted health teaching in a classroom	☐ School nurse in-services, conferences

NURS 186, School Nurse Practicum I, Preceptor Checklist Cont.

Practicum time must add up to 80 hours for a student currently employed as a school nurse, 120 hours for a student not currently employed as a school nursing, 100 hours for a practicing PHN.

Preceptors must approve the following student activities away from direct supervision:

- Time spent by school nurse student in a leadership activity/project not specified in Student Goals and Objectives (max. 10 hrs.)
- *An Experienced School Nurse Project.* Preceptor must sign off on completion (max. 20 hrs). Points earned for a completed project will be determined by the student's clinical instructor following review.
- Time spent participating in community activities, visiting agencies and/or programs (8-10 hrs.)
- School nurse workshops/conferences (10-12 hrs.)

Please complete the following related to hours:

No. of hours spent under your direct supervision providing health services at a school site?	
No. of hours spent with your guidance in completing a leadership activity or Ex SN Project?	
No. of hours spent with your recommendation participating in community activities/SN meetings?	
Total Number of Hours	

Taking all practicum activities into consideration, rate the total performance of this student:

	Excellent	Very Good	Good	Fair	Poor
Circle no.	5	4	3	2	1

List areas in which the student may need further mentoring/experience:

Would you recommend this student for credentialing? Yes _____ No _____

Additional comments:

Preceptor Signature _____ **Date** _____

Completed evaluation must be faxed or mailed to clinical instructor after a preceptor conference with student to discuss outcomes of practicum experience and before the end of the semester. Fax completed evaluation forms to the attention of the clinical instructor at (559) 278-1013; or mail to the attention of the clinical instructor to CSU, Fresno Dept. of Nursing, 2345 E. San Ramon Ave, M/S MH 25, Fresno, CA 93740-8031.

2. EVALUATION TOOL - SECONDARY

N187 PRECEPTOR CHECKLIST OF SKILLS AND COMPETENCIES (SECONDARY)

It is important that every effort be made to complete the clinical experiences indicated in each of the following areas. The preceptor must witness the student completing the procedure, assessment, and/or work. If the student does not have the opportunity to complete an experience, the preceptor is to discuss the area in depth and determine that the student has sufficient knowledge of the subject matter. If the student has had two or more years of school nursing experience at the secondary level and explains/demonstrates to the preceptor satisfaction that he/she is competent in a particular area, the preceptor may choose to sign the student off with comments below indicating his/her satisfaction with the student's level of knowledge/competence.

Providing Health and Wellness Services (Primary Intervention)

					Comment if not met
		Met		Date	Preceptor initials
		Y	N		
S1	Correctly carries out the Nursing Process in problem solving and in assessing and caring for preadolescents/adolescent students in the school setting.				
S2	Demonstrates competency in planning, organizing, and conducting mass screening to detect deviations from norm related to vision, hearing, scoliosis, and Acanthosis Nigricans				
S3	Demonstrates the ability to develop age appropriate health curriculum/lesson plan and competently teaches or facilitates a group discussion(s) in keeping with district policy and the Ed Code.				
S4	Correctly identifies relevant community resources for adolescent population and makes appropriate referrals.				
S5	Properly trains/supervises medication administration and procedures carried out by unlicensed personnel.				
S6	Explains insight into importance of campus security and describes issues, i.e., gang activity, weapons on campus, other.				
S7	Demonstrates an understanding for emergency steps in school wide emergencies, i.e., natural disasters, bomb threats				
S8	Utilizes effective communication skills and sensitivity when assisting/counseling with adolescents, families, and staff.				
S9	Identifies appropriate programs/services for students/families with special needs/problems (e.g., mental health, family planning needs, prenatal care).				
S10	Takes leadership role in assisting and referring students and families to appropriate services within the community				
S11	Demonstrates ability to promote healthy nutrition and a healthy lifestyle among adolescents and staff through modeling, health promotion, and health education at the secondary level.				

S12	Discusses various health issues associated with different types of athletic activities and nutritional requirements.				
S13	Expresses insight into the SN role in participating in the development and execution of coordinated health education programs and screening programs, keeping socio-cultural issues and budget constraints in mind.				
S14	Describes at least 5 things related to organizing and implementing an overall school health program at the secondary level.				
S15	Demonstrates ability to promote mental health among adolescents and school staff through recognition of need, assessment, counseling, and referral for appropriate services.				
S16	Participates in reporting of suspected child abuse, including that which relates to unlawful sexual activity/abuse, including date rape. Discusses laws regarding reporting sexual activity among minors.				
S17	Describes signs and symptoms of at least 3 types of substance abuse, assessment steps, reporting and referral guidelines, and an appropriate referral agency(s) for substance abusers and support group(s) for families.				
S18	Discusses issues associated with adolescent absenteeism and the role of the school nurse in preventing school drop-out. Describes various alternative programs to help teens/young adults complete schooling.				
SNC 2. Providing Direct Client Care Services (Secondary and Tertiary Intervention)					
		Met			
		Y	N		Comments
S19	Demonstrates ability to provide healthcare services to students and emergency and/or first aid assistance to others in the school setting.				
S20	Demonstrates the ability to properly evaluate and manage various types of sports injuries, including acute injuries, makes appropriate referral.				
S21	Relates insight into behavioral, emotional, and mental health issues that affect adolescents, uses appropriate counseling techniques and referrals to appropriate professional within the school and community.				
S22	Describes signs/symptoms of at least 2 types of eating disorders. Given the opportunity, demonstrates appropriate counseling techniques, contacts the correct individuals and refers appropriately.				
S23	Describes signs of depression and suicide threat. Demonstrates ability to use appropriate counseling techniques and guidelines regarding sharing confidential information in the best interest of the individual and others.				

	Describes appropriate contacts and referral.					
S24	Demonstrates ability to counsel pregnant teens, with knowledge of confidential guidelines, cultural issues, insight into assistance programs and agencies, and to promote healthy behaviors and school attendance.					
S25	Describes the emergency steps taken by school administrators/personal and the school nurse in the unlikely event of a natural disaster in your area. What outside agencies that could be involved? (earthquake, flood, fire)					
S26	Uses the appropriate, confidential and culturally sensitive counseling techniques with students suspected of having an STD, makes referral to appropriate community agency. Discusses issues related to possible contacts.					
S27	Demonstrates ability to case manage the multifaceted health related needs of an adolescent and/or family i.e., financial assistance, appropriate services, and relevant programs, while keeping socio-cultural issues in mind.					
S28	Describes role of the school nurse in making sure that students properly take/use medication how/when ordered, including self-carry.					
S29	Demonstrates understanding for needs of wheelchair bound individuals and students dependent on other types of health related equipment and assistance, i.e. learning materials, access to facilities, toileting, body alignment issues.					
S30	Describes the role of the school nurse as a member of the school crisis team in planning, responding, and participating in a crisis intervention at school.					
School Nurse Competencies 3. Professional Management Skills						
		Excellent = 5 and Poor = 1				
		5	4	3	2	1
S31	Demonstrates leadership and the ability to use professional knowledge, skills, and ethical decision making to promote health among students and staff at the secondary level.					
Comments:						
S32	Demonstrates the ability to work creatively with others in the school community within the public education system to promote healthy behaviors and lifestyles among adolescents and staff at the secondary level.					
S32 Comments:						
S33	Demonstrates the ability to model evidence-based healthcare practices in the delivery of school nursing services at the secondary level (research), as well as to use a theoretical base to guide practice.					
Comments:						

S34	Discusses legal guidelines and gives examples in school nursing practice as they relate to HIPAA, FERPA, IDEA, confidentiality, student rights, health ed.					
Comments:						
S35	Demonstrates the ability to work well with adolescents as evidenced through a show of sensitivity towards their emotional, social, cultural, and developmental needs.					
Comments:						
S36	Expresses understanding for what is involved in creating and maintaining a comprehensive school health services program at the secondary level.					
Comments:						
S37	Demonstrates a global understanding for the role of the school nurse as it relates to school and community, i.e. collaboration, communication, use of resources.					
Comments:						
S38	Demonstrates ability to work in a collaborative and collegial manner with others at the secondary level.					
Comments:						
S39	Demonstrates the ability to communicate effectively in writing and verbally, and make clear oral presentations to a wide variety of audiences.					
Comments:						
S40	Demonstrates the ability to use time effectively, adapt to new and unanticipated situations, and to manage fiscal and personnel resources prudently.					
Comments:						

Time spent in other settings. Check areas that apply. (Students to discuss in journal)

☐ Community/juvenile court school ☐ Continuation high School ☐ Drug intervention program ☐ Health/career fair planning, participation ☐ School nurse in-services/conferences ☐ Health teaching in a classroom	☐ School nurse in-services/conferences ☐ Program for emotionally disturbed ☐ Faculty/staff in-service, School Council mtg. ☐ Student Attendance Review Board ☐ Teen pregnancy/parenting program ☐ Facilitated a small group

NURS 187, School Nurse Practicum II, Preceptor Checklist Cont.

Practicum time must add up to 80 hours for a student currently employed as a school nurse, 120 hours for a student not currently employed as a school nursing, 100 hours for a practicing PHN.

Preceptors must approve the following student activities away from direct supervision:

- Time spent by school nurse student in a leadership activity/project not specified in Student Goals and Learning Objectives (max. 10 hrs.)
- *An Experienced School Nurse Project.* Preceptor must sign off on completion (max. 20 hrs). Points earned for a completed project will be determined by the student's clinical instructor following review.
- Time spent participating in community activities, visiting agencies and/or programs (8-10 hrs.)
- School nurse workshops/conferences (10-12 hrs.)

Please complete the following related to hours:

No. of hours spent under your direct supervision providing health services at a school site?	
No. of hours spent with your guidance in completing a leadership activity or Ex SN Project?	
No. of hours spent with your recommendation participating in community activities/SN meetings?	
Total Number of Hours	

Taking all practicum activities into consideration, rate the total performance of this student:

	Excellent	Very Good	Good	Fair	Poor
Circle no.	5	4	3	2	1

List areas in which the student may need further mentoring/experience:

Would you recommend this student for credentialing? Yes _____ No _____

Additional comments:

Preceptor Signature _____ **Date** _____

Completed evaluation must be faxed or mailed to clinical instructor after a preceptor conference with student to discuss outcomes of practicum experience and before the end of the semester. Fax completed evaluation forms to the attention of the clinical instructor at (559) 278-1013; or mail to the attention of the clinical instructor to CSU, Fresno Dept. of Nursing, 2345 E. San Ramon Ave, M/S MH 25, Fresno, CA 93740-8031.

2. DATA ANALYSIS

Assessment of Preceptor Checklist of Skills and Competencies for NURS 186, School Nurse Practicum I – Elementary, and Preceptor Checklist of Skills and Competencies for NURS 187, School Nurse Practicum II – Secondary, will be presented together as follows:

Note: The skills and competencies checklists for NURS 186 and NURS 187 were revised for the 2009-2010 academic year to reflect the new CCTC 2007 recommended candidate competencies. Because of the likeness in the NURS 186 and NURS 187 evaluation tools, though specific to each educational level for each practicum, they will be discussed and present together.

NURS 186 & NURS 187 Preceptor Checklist of Skills and Competencies are divided into 3 sections.

The following two sections each has a comprehensive list of skills and competencies that must be observed and checked off by the candidate's preceptor as "Met" or "Unmet."

*** School Nurse Competencies I: *Providing Health and Wellness Services (Primary Intervention)*** Examples of expected candidate competencies in this category for both N186 & N187:

"Organizes and correctly performs state mandated screening, i.e., vision, hearing, scoliosis."

"Correctly carries out the nursing process in problem solving matters related to program; and in health assessment of clients, which includes history taking, growth & development, nutritional status."

***School Nurse Competencies 2; *Providing Direct Client Care (Secondary & Tertiary Intervention)*.** Examples of expected candidate competencies in this category:

"Demonstrates competence in providing appropriate healthcare services to students coming to the health office and others in the school setting."

"Demonstrates competence in assessment and management of acute injuries and other medical emergencies; and provides appropriate emergency first aid."

***School Nurse Competencies 3, *Professional Management Skills*.**

Competence in this area is determined by a 5 point Likert scale. The 10 questions for used for both practicum courses, though they relate specifically to elementary school nursing for NURS 186 and secondary school nursing for NURS 187. See following data outcomes for School Nurse Competencies 3.

* School Nurse Competencies 3, Professional Management Skills												
Taking all practicum activities into consideration, rate the total performance of this candidate using the following scale.												
Key: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair; 1 = Poor												
		Elementary					Secondary					
		Fall 2009					Spring 2010					
		Number of candidates					36 Total					
		5	4	3	2	1	5	4	3	2	1	
1	Demonstrates leadership and the ability to use professional knowledge, skills, and ethical decision making to promote the overall health of the school community and of individuals.	34 94 %	2 6 %	0	0	0	35 97 %	1 3 %	0	0	0	
2	Describes a realistic plan for organizing and implementing an overall school health program that considers uniqueness of population and cultural differences.	32 88 %	4 1 2 %	0	0	0	35 97 %	1 3 %	0	0	0	
3	Reiterates (give examples of) legal guidelines of school nursing practice, i.e., sections of Ed. Code, other state and federal laws as they applied to health services, program planning, health promotion and teaching.	30 83 %	6 1 7 %	0	0	0	34 94 %	2 6 %	0	0	0	
4	Demonstrates ability to model evidence-based healthcare practices in the delivery of school nursing services (research), as well as use a theoretical base to guide practice.	34 94 %	2 6 %	0	0	0	33 92 %	3 8 %	0	0	0	
5	Demonstrates the ability to advocate appropriately with students, families, community, and others to promote healthy behaviors and lifestyles.	35 97 %	1 3 %	0	0	0	35 97 %	1 3 %	0	0	0	
6	Demonstrates ability to communicate with clarity and professionally, both orally and in writing, with professionals, families, and students.	32 88 %	4 1 2 %	0	0	0	33 92 %	3 8 %	0	0	0	
7	Demonstrates ability to work in a collaborative and collegial manner with others in a public education system, with understanding for the structure and authority of school district administration.	36 100 %	0	0	0	0	36 100 %	0	0	0	0	
8	Demonstrates ability to organize and maintain accurate and complete health records.	34 94 %	2 6 %	0	0	0	36 100 %	0	0	0	0	
9	Demonstrates the ability to use time effectively, and manage fiscal and personnel resources prudently.	34 94 %	2 6 %	0	0	0	35 97 %	1 3 %	0	0	0	
10	Demonstrates the ability to train, supervise, and monitor others who may assist students in taking medication and/or provide specialized physical healthcare procedures to students.	35 97 %	1 3 %	0	0	0	33 92 %	3 8 %	0	0	0	

Final evaluation of candidate performance, 4										
	5	4	3	2	1	5	4	3	2	1
Was the preceptor satisfied that the candidate demonstrated that he/she was capable of satisfactorily meeting required competencies/skills?	36 100 %	0	0	0	0	36 100 %	0	0	0	0
Taking all activities into consideration, rate total candidate performance	32 88 %	4 1 2 %	0	0	0	34 94 %	2 6 %	0	0	0
Would you recommend this candidate for a Clear Credential?	Yes – 36 = 100%					Yes – 36=100%				
<u>Summary of finding:</u>										
In NURS 186 (Elementary) - Preceptors rating candidate clinical performance as 5 “Excellent” (88%) or 4 “Very Good” (12%); no candidates were rated 3 “Good,” 2 “Fair,” or 1 “Poor” in any category.										
In NURS 187 (Secondary) – Preceptors rated candidate clinical performance as 5 “Excellent” (94%) or 4 “Very Good” (6%). No candidates were rated in the 3 “Good,” 2 “Fair,” or 1 “Poor” categories.										

NURS 186/NURS 187

Preceptor Evaluation of Candidate Professional Dispositions 2008-2009 and 2009-2010

Includes:

(1) Evaluation Tool and (2) Data Analysis

The purpose of this evaluation is to determine the extent to which candidates incorporate these professional dispositions into their school nursing practice. To foster in the candidate professional dispositions that are essential in interacting professionally with school age children, families, school staff, and others, and in meeting the healthcare needs of school age children. These dispositions are: The tendency to reflect, the use of critical thinking, the use of well reasoned ethical judgment, an appreciation for diversity, a collaborative disposition, and the tendency for life-long learning.

School site preceptors are expected to observe for these traits in candidates during the candidates field experience. At the end of the semester, preceptors are asked to meet with candidates to discuss these dispositions, and to complete and sign the evaluation form which is submitted to the clinical instructor. Instructions are included with evaluation form to aid the preceptor in completing the evaluation.

1. EVALUATION TOOL

NURS 186/NURS 187 PRECEPTOR EVALUATION OF STUDENT PROFESSIONAL DISPOSITIONS

Student Name_____ Semester_____ Year_____

Please CIRCLE the number on scale that reflects the most accurate description of student application of dispositions. Give examples/comments in space provided. Student may help furnish examples.

1. Candidate demonstrates the ability to REFLECT. (A broad knowledge base, empathy and altruism are developed through parallel focus on experience and reflection.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

2. Candidate demonstrates CRITICAL THINKING skills. (The disposition to analyze situational context results in more informal decision-making. Credential candidates will be practiced in analyzing intra-personal, interpersonal and contextual issues in the clinical/educational setting.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

3. Candidate demonstrates ability to make ETHICAL JUDGEMENTS (Ability to make well-reasoned ethical decisions/judgments based knowledge and reflection that result in professional action)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

4. Candidate demonstrates the dispositional tendency to VALUE DIVERSITY - cultural, linguistic, cognitive, and physiological. (This disposition is critical to differentiating instruction and creating psychologically and physically safe helping/learning environments.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

5. Candidate demonstrates a COLLABORATIVE disposition. (The school nurse must collaborate/communicate meaningfully/effectively with other professionals, school site personnel, members of the community and families in order to effectively meet the health care needs of children/adolescents.)

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

6. Candidate demonstrates their enthusiasm for LIFE-LONG LEARNING. (Professional integrity is rooted in commitment to life-long learning about one's profession and beyond.

Excellent	Very Good	Good	Fair	Poor
5	4	3	2	1

Note: Dispositions reflected in clinical practice, see following page for guidelines.

This completed evaluation to be sent to clinical instructor with other evaluation forms by the end of the semester.

Suggested Situations that Reflect Dispositions in Clinical Practice

2. REFLECT

- a. Demonstrated in deciding on Student Goals and Objectives (based on passed experiences).
- b. Every day office situations (evidenced of reflection in decision making/problem solving).
- c. Mid-term and Final Student Self Evaluations/Preceptor conferences (what is done, still to do).

3. CRITICAL THINKING

- a. Every day office situations (effectively analyzes information received/related to students, families, care providers, faculty, others, and addresses issues based on that analysis.)
- b. Nursing process/Cult. Differences Sp. Ed Case Study (analysis of data, conclusions, solutions)
- c. Crisis intervention, emergency situations

4. ETHICAL JUDGEMENTS

- a. Every day decisions that affect the welfare of the child.
- b. Keeping personal opinions/judgments out of counseling and guidance
- c. Basing decisions on standards of good nursing practice

5. VALUE DIVERSITY

- b. Every day interaction with students/families/staff/others of a different culture/ethnicity than that of the school nurse student. Takes steps to seek help in communication/interpretation.
- c. Health education/health promotion, altering curriculum/presentations to include appropriate cultural/ethnic differences.
- d. Students complete an in depth cultural evaluation, i.e. Cross Cultural Case Study

6. COLLABORATION

- b. Evidence of collaboration as shown in interaction with other professionals at the school site, health care providers/agencies, families, i.e., in meeting needs of children and families.
- c. Evidence of collaboration meeting attendance, i.e., SARB, parent meetings, meetings with other professionals, school nurse peers, community, health fairs, etc.
- d. Conferences between preceptor, student and clinical instructor

7. LIFE-LONG LEARNING

- a. Attendance at professional school nurse meetings, school nurse workshops, conferences
- b. Demonstrates enthusiasm for learning through researching health problems, cultural background, other issues related to a child student is assisting.
- c. Demonstrating an interest in professional organizations, legislation, current issues.

2. DATA ANALYSIS

PRECEPTOR EVALUATION OF CANDIDATE PROFESSIONAL DISPOSITIONS

Key: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair; 1 = Poor																					
		32 responders					30 responders					31 respondents					30 responses				
Candidate Dispositions demonstrated		NURS 186 - F 2008					NURS 186 – F 2009					NURS 187 – S 2009					NURS 187 – S 2010				
		5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
1	Ability to REFLECT.	26	5	1	0	0	28	2	0	0	0	29	2	0	0	0	26	4	0	0	0
		81 %	16 %	3 %			93 %	7 %				94 %	6 %				87 %	13 %			
2	CRITICAL THINKING skills.	27	5	0	0	0	27	3	0	0	0	31	0	0	0	0	26	4	0	0	0
		84 %	16 %				90 %	10 %				100 %					87 %	13 %			
3	Ability to make ETHICAL JUDGEMENTS	29	3	0	0	0	29	1	0	0	0	30	1	0	0	0	27	3	0	0	0
		91 %	9 %				97 %	3 %				97 %	3 %				90 %	10 %			
4	Tendency to VALUE DIVERSITY	28	4	0	0	0	28	2	0	0	0	29	2	0	0	0	28	2	0	0	0
		88 %	13 %				93 %	7 %				94 %	6 %				93 %	7 %			
5	COLLABORATIVE Disposition.	27	5	0	0	0	28	2	0	0	0	31	0	0	0	0	28	2	0	0	0
		84 %	16 %				93 %	7 %				100 %					93 %	7 %			
6	Enthusiasm for LIFE-LONG LEARNING.	25	6	1	0	0	28	2	0	0	0	29	2	0	0	0	28	2	0	0	0
		78 %	19 %	3 %			93 %	7 %				94 %	6 %				93 %	7 %			

Summary of findings:

Preceptor ratings of Candidate Professional Dispositions:

Fall 2008, NURS 186, SN Practicum I – Preceptors rated all candidate dispositions as “Excellent” (81%-91%) or “Very Good” (9%-19%) in categories 2, 3, 4, and 5. In categories (1) “Ability to Reflect” and “Enthusiasm for Life Long Learning,” candidates were rated as “Good” (3%).

Fall 2009, NURS 186, SN Practicum I – Preceptor rated all candidate disposition areas as “Excellent” (93%-97%) or “Very good” (3%-10%).

Spring 2009, NURS 187, SN Practicum II - Preceptor rated all candidate disposition areas as “Excellent” (94%-100%) or (4) “Very good” (0%-6%).

Spring 2010, NURS 187, SN Practicum II - Preceptor rated all candidate disposition areas as (5 “Excellent” (87%-93%) or (4) “Very good” (7%-13%).

Note: Candidates in the School Nurse Services Credential program come from experienced nurse backgrounds and were acquainted with use of these dispositions in their previous nursing practice.

NURS 186/NURS 187

Preceptor Evaluation of

Clinical Course

2008-2009 and 2009-2010

Includes:

(1) Evaluation Tool and (2) Data Analysis

Questions asked: “How pertinent is the course content to the school nursing experience?” “Are there experiences you would include/eliminate?” “Could changes be made to improve your preceptor experience?” Completed by preceptor and submitted to program coordinator at the end of the semester. Responses to this evaluation tool give faculty insight into areas of strength and weakness related to the clinical course.

1. EVALUATION TOOL

California State University, Fresno
Department of Nursing
School Nurse Services Credential Program

PRECEPTOR EVALUATION OF CLINICAL COURSE NURSING 186/187

Course _____; Semester _____; (circle) Elementary or Secondary Experience

Before responding to questions review course objectives/content in Preceptor Syllabus, pp. 5-9.

1. How pertinent is course content (current practicum level) to the school nursing experience?

Extremely Pertinent _____; Very Pertinent _____; Fairly Pertinent _____; Not Pertinent _____

Comment:

2. Are there other activities/experiences you would include?

(Keep in mind that some experiences will take place in a future or previous semester)

3. Are there activities/experiences you would eliminate?

4. What changes could be made to improve your experience as a preceptor?

Signature (optional) _____ Date _____

Thank you again for making this experience possible for this student!

Faxed completed form to Beverly Miller, Program Coordinator at (559) 278-1013

2. ANALYSIS OF DATA

PRECEPTOR EVALUATION OF CLINICAL COURSE (NURS 186, Practicum I; NURS 187, Practicum II)

NURSING 186, School Nurse Practicum I (Elementary) - Fall 2008 and Fall 2009											
Key, Q1: 4 = Very Pertinent; 3 = Pertinent; 2 = Fairly Pertinent; 1 = Not Pertinent ; 0 = No Response											
		F 2008					F 2009				
		32 Respondents					33 Respondents				
	Question for Preceptor	4	3	2	1	0	4	3	2	1	0
	How pertinent is course content to school nursing practice at the elementary educational level?	21	11	0	0	0	28	5	0	0	0
		66 %	34 %				85 %	15 %			

NURSING 187, School Nurse Practicum II (Secondary) - Spring 2009 and Spring 2010											
Key, Q1: 4 = Very Pertinent; 3 = Pertinent; 2 = Fairly Pertinent; 1 = Not Pertinent ; 0 = No Response											
		S 2009					S 2010				
		33 Respondents					33 Respondents				
	Question for Preceptor	4	3	2	1	0	4	3	2	1	0
	How pertinent is course content to school nursing practice at the secondary educational level?	21	7	1	0	4	25	5	0	0	3
		64 %	21 %	3 %		12 %	75 %	15 %			9 %

Summary of findings:

Preceptors (Fall 2008, through spring 2010) rated the pertinence of candidates' clinical experience as:

NURS 186: "Very Pertinent" (F 2008, 66% & F 2009, 85%) or "Pertinent" (F 2008, 34% & F 2009 – 15%)

NURS 187: "Very Pertinent" (S 2009, 64% & S 2010, 75%) or "Pertinent" (S 2009, 21% & S 2010 – 15%)

Note: The number of preceptors who rated clinical courses, both N186 and N187, as "Very Pertinent" increased significantly between 2008- 2009 and 2009-2010. Preceptors did not express any major dissatisfaction with clinical courses.

Preceptor's comments regarding suggested areas needing changes/improvement are carefully reviewed by faculty. Changes are made if appropriate, i.e. the suggestion to include clinical course objectives and seminar course weekly course content into Preceptor Syllabus to give preceptors a clear understanding for candidate learning expectations in the program as done. No preceptors expressed disappoint in their preceptor experience over the two year period. One complaint related to "too much evaluation paperwork." In this matter faculty has made an effort to simplify evaluation tools. Another suggested was that a breakout session be offered through the California School Nurse's Organization that would prepare school nurses for the roll of preceptor. This suggestion was brought up by the program coordinator at the CA University School Nurse Educators' annual meeting in 2009.

NURS 184/NURS 185/NURS 186/NURS 187

Candidate Evaluation of Core School Nurse Courses 2008-2009 and 2009-2010

Includes:

- (1) Evaluation Tool, (2) Data Analysis**
- (3) Response to Complaints/Suggestions**

Questions asked: "Overall rating of this three unit course." Aspects of the course which have been most valuable?" "Suggested changes that would enhance your learning experience? Completed by candidates at the end of each course and submitted to program coordinator.

1. EVALUATION TOOL

CALIFORNIA STATE UNIVERSITY, FRESNO

Department of Nursing

School Nurse Services Credential Program

Semester/Year **Spring 2010**

COURSE #31571, NURS 185, School Nurse Seminar

Overall rating of this 3 unit course. Place an (*) following your number selection.

Excellent 5 4 3 2 1 Poor

Aspects of the course which have been most valuable to you:

Suggested changes that would enhance your learning. Please be as specific as possible:

Name (optional)

Please note: This same evaluation form is used for NURS 184, NURS 186, and NURS 187.

Fax completed evaluation to Carol Rayner, Dept. of Nursing, at 559-278-6360. Thank you!

2. ANALYSIS OF DATA

COURSE EVALUATION BY CANDIDATE

For the following core school nurse courses:

NURS 184, Introduction to School Nursing, F 2008 and F 2009

NURS 185, School Nurse Seminar, S 2009 and S 2010

NURS 186, School Nurse Practicum I, F 2008 and F 2009

NURS 187, School Nurse Practicum II, S 2009 and S 2010

Candidate rating of Seminar Courses – NURS 184, Introduction to School Nursing; NURS 185, School Nurse Seminar																				
Key: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair; 1 = Poor																				
	NURS 184 - F 2008					NURS 184 – F 2009					NURS 185 – S 2009					NURS 185 – S 2010				
Candidate evaluation of course	24 Respondents					23 Respondents					24 Respondents					34 Respondents				
	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
Overall course rating	16	7	1	0	0	16	6	1	0	0	19	5	0	0	0	34	4	1	0	0
	67 %	29 %	4 %			70 %	26 %	4 %			74 %	21 %				85 %	12 %	3 %		

Candidate rating of Practicum Courses – NURS 186, School Nurse Practicum I; NURS 187, School Nurse Practicum II																				
Key: 5 = Excellent; 4 = Very good; 3 = Good; 2 = Fair; 1 = Poor																				
	NURS 186 - F 2008					NURS 186 – F 2009					NURS 187 – S 2009					NURS 187 – S 2010				
Candidate evaluation of course	22 Respondents					23 Respondents					26 Respondents					32 Respondents				
	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
Overall course rating	16	5	1	0	0	17	5	1	0	0	21	5	0	0	0	23	6	2	0	0
	73 %	23 %	3 %			74 %	21 %	5 %			80 %	20 %				75 %	19 %	6 %		

Summary of findings:

Candidates rating all four core school nurse courses, both seminars and practicum as “Excellent” or “Very good” at least 94% of the time. Between 3-6% of candidates rated courses as “Good.”

No candidates rated any of the courses in the “Fair” or “Poor” categories.

3. FACULTY RESPONSES TO CANDIDATE COMPLAINTS/SUGGESTIONS

CSUF School Nurse Services Credential Program
CANDIDATE EVALUATION OF CORE SCHOOL NURSE COURSES

NURS 184, Introduction to School Nursing (seminar) – Fall 2008 (26 responses out of class of 35)	
Positive comments from candidates regarding course: The opportunity to choose topics and assignments to suit their educational needs (3), insight into Education Code and other laws that guide school nursing practice (2), resources provided in course to respond to research questions (3), discussion board participation and networking (2), valuable research questions and variety of topics (6), value of Blackboard presentations (3), review of basic skills (1), insight into history of school nursing (1), school board visit and related write-up (1). (Note: Number following each comment = number of candidates with same comment.)	
Complaints/Suggestions	Faculty response
<u>Most significant complaint:</u> Too much required reading and written work. (8) (31% of responders.) Note: In many cases, students (all of whom are adult learners) admit that their overload is related to complex lives, i.e., full-time jobs and family responsibilities while trying to complete course requirements for a credential at the same time. (See following for improvement in input from responders for F. 2009)	Faculty continues to find ways to work with students to decrease stress and lighten the workload without jeopardizing the learning experience, i.e. working with individual candidates to help them organize their time, decreasing assignment writing requirements and time spent participating in Blackboard discussion whenever possible, and giving candidates a choice of assignments. Candidates are also reminded before beginning the program that they need to evaluate their circumstances and consider taking just one class at a time if necessary.
Questioned need for assignment related to cultural differences – book report or cultural interview. (1)	Value of understanding cultural differences cannot be overstated. Candidates must understand importance of need for insight into working with clients from all cultural and ethnic backgrounds.
Expressed discomfort in being asked to critique Blackboard presentations by fellow classmates. (1)	This has always been anonymously. At one point candidates were asked to elaborate on strengths and weaknesses of presentation. This has since been change asking candidates to respond to a simple rating scale related to value of presentation to readers school nursing practice. Insight into value students place on presentation information is helpful to faculty.
Complaints of Blackboard technical issues. (1)	Digital Campus is available to candidates, as well as a CSUF Help Desk, to assist them in resolving computer issues. These complaints are getting fewer as technology continues to improve.
Complained about time spent reading and participating in discussion following Blackboard presentations (3)	To stimulate discussion candidates had been asked to respond to postings by two other classmates following Bb presentations as well as responding to presenter's case scenario following the presentation. This has since been changed to requiring students to just respond to one fellow classmate's posting in participating in discussion along with responding to the case scenario.

NURS 184, Introduction to School Nursing (seminar) – Fall 2008 (23 responses out of class of 31)	
Positive comments from candidates regarding course: All 23 responders included positive comments or rated the course favorably. Positive responses can be found in returned evaluations completed by candidates.	
Complaints/Suggestions	Faculty response
<u>Most significant complaint:</u> Too much required reading and written work. (3) (13% of responders.)	Note efforts made by faculty in previous fall semester to deduce workload for students.
Complaints of minor Blackboard technical problems (2)	See previous comment.
Minor suggestions, i.e., improving scoring for a particular assignment.	Improvements continue to be made in information provided in syllabus and assignment details.

NURS 186, School Nurse Practicum I – Fall 2008 (26 responses out of class of 36)	
Positive comments from candidates regarding course: Learned so much regarding policies, procedures, IEPs, legal guidelines, law (2); enjoyed going to different school sites (2); excellent preceptor and role model (9); online resources (1); “All I have done and recommended readings (1); Blackboard discussion, research from text (1); being able to tailor clinical experience the my needs (2); projects and journal questions (1); class participation and sharing (2); exposure to unknown areas (1); value to case study (1); visits to outside agencies.	
Complaints/Suggestions	Faculty response
<u>Most significant complaint:</u> Too much written work required, i.e., journaling (4) (15% of responders)	Journaling is an important means by which faculty monitors student clinical activities. Faculty has reformatted and streamlines journaling to lessen need for extensive narrative.
Suggestion to shorten Blackboard discussion time related to clinical practice and sharing. (1)	Candidates are required to spend 40-45 minutes a week in discussion in clinical courses. Faculty does not consider this excessive. Discussion time is an important aspect of learning in the course. Candidates share case scenarios, experiences with one another and respond to instructor prompts with regard to topics.
Suggested that it be recommended that students take just one class each semester at a time to reduce workload. (1)	Again, candidates are advised that they should evaluate their own situation and make a discussion regarding workload based on their own needs.
Suggested use of own school worksite for practicum instead of working with preceptor at another site. (2)	There is a need for close monitoring of clinical activities in this online program. Candidates are not allowed to use their employee work time for practicum hours as a student. Working away from their worksite gives the student the opportunity to concentrate on learning without job interference. It also allows the student to observe their preceptor involved in office management, case management, etc.
Complaint that Student Internship Agreement (University-Agency Contract) takes too much time to negotiate and infringes on practicum hours.	Candidates are given information on need of University-Agency Contract in April prior to the fall semester and informed that initiation of the contact needs to begin as soon as possible.

NURS 186, School Nurse Practicum I – Fall 2009 (22 responses out of class of 36)	
Positive comments from candidates regarding course: Excellent course!, course was great!, constructive clinical instructors, enjoyed Blackboard discussions.	
Complaints/Suggestions	Faculty response
Most significant complaint: Heavy workload (3) 14% of responders	When candidates enter Phase II (core school nurse courses) and choose to take both a seminar and a practicum with all their other responsibilities, they can feel overwhelmed in the fall. Adjustments have been made such as requiring fewer formal papers, i.e. SARB paper and making it into a response to a journal question, giving candidates assignment choices, and decreasing required written time on Blackboard. This was done without jeopardizing the candidate's learning experience.
Journaling took too much time (1) Note: 5% compared to 15% in fall 2008	Changes made in journaling format decreased complaints of "too much writing in journaling."
Blackboard technical difficulties (2)	See previous comments

NURS 185, School Nurse Seminar – Spring 2009 (26 responses out of a class of 35)	
Positive comments from candidates regarding course: All 26 responders included positive comments or rated the course favorably. Positive responses can be found in returned evaluations completed by candidates.	
Complaints/Suggestions	Faculty response
Most significant complaint: Heavy workload (6) 23% of responders	The spring semester is usually less stressful for candidates as they have adjusted to the workload. In both seminar courses, candidates are required to respond to one research question a week along with three additional papers. A research question is not required the week that the partnered candidate's Blackboard presentation is due. Consideration is being given to changing a required narrative response to research questions to a summary report or preformatted worksheet to demonstrate knowledge.
Suggestion that candidates be informed before semester begins regarding details of assignments. (1)	Course syllabi are available to candidates at least a week prior to the beginning of the semester. Candidates completing NURS 184 are given information on a book report in December for an assignment candidates may choose for NURS 185. Consideration is being given to send out information in the Phase II Admission Packet, sent out in April, on a book related to cultural differences that candidates may choose to report on as an assignment in NURS 184. This would also reduce stress in the fall.

NURS 185, School Nurse Seminar – Spring 2010 (34 responses out of a class of 34)	
Positive comments from candidates regarding course: All 34 responders included positive comments or rated the course favorably. Positive responses can be found in returned evaluations completed by candidates.	
Complaints/Suggestions	Faculty response
Miscellaneous complaints/suggestions	
Candidate questions need for legislative paper (1)	The importance of the legislative paper cannot be overstated, as candidates need to understand the legislative process, opposing and supporting bills, and contacting legislators as it relates to protecting and advocating for children and families, as well as school nursing.
Candidate questions need for book report related to gaining insight into adolescent mental health issues. (1)	Candidates have a choice of reading a book related to adolescent mental health issues or researching and writing a paper on mental health issues. It should go without saying that candidates planning to work with adolescents must have insight into adolescent mental health issues that affect live and learning.
Candidate would prefer to have all learning take place via Blackboard presentations rather than writing up weekly research questions. (1)	Candidates are divided on value of researching on their own and presentations by others. Many candidates prefer to have the opportunity to choose a topic of personal interest to them rather than have it selected for them as a Bb presentation. For that reason, students are given both avenues of learning.
Candidate would like an in-class meeting during the semester. (1)	This is an online program. Pulling students together from around the state during the semester for an in class experience would not be possible, though online class meetings are possible. While it is difficult to bring the entire class together at one time, faculty plans to arrange to meet with small groups of candidates to go over questions and concerns, especially before assignments are due for the first module (first four week period).

NURS 187, School Nurse Practicum II, Spring 2009 (26 responses out of a class of 36)	
Positive comments from candidates regarding course: All 26 responders included positive comments or rated the course favorably. Positive responses can be found in returned evaluations completed by candidates.	
Complaints/Suggestions	Faculty response
Most significant complaint: Time spent away from own worksite were too many for experienced school nurses. (2) 8%	Explanation of hours: Guidelines for hours related to clinical courses are the same as those for other nursing courses in the university. There are a total of 135 hours for each three (3) unit practicum course. Of those 135 hours, 15 hours are devoted to class discussion relevant to clinical practice (leaving 120 hours). Candidates who are employed as school nurses are automatically given 40 hours credit for experience (leaving 80 hours). Ten (10) hours are allotted to community activities relevant to school nursing and ten (10) hours are

	allotted to attendance at school nurse workshops and conferences (leaving 60 hours). Candidates who have worked in school nursing for two (2) years are allowed to use up to 20 hours of that time on a special project relevant to school nursing. The remainder of time, 40 hours, must be spent away from the candidate's worksite working and learning under a qualified school nurse preceptor. Faculty believes this is the very minimum amount of acceptable time that needs to be spent working with a qualified preceptor. Note: Other candidates have expressed the need for more quality clinical practice time with their preceptor.
Suggestion that candidates be allowed to use work time at their own worksite for clinical hours.	See NURS 186, fall 2008 for comments.
Candidate (1) indicated that health teaching in the classroom was not done by school nurses in the district in which he/she was doing clinical experience. The preceptor in this case was able to accommodate the candidate and provide this experience.	This is a rare situation. Health teaching is an important aspect of school nursing. In the future clinical instructors will be advised to discuss the importance and need for the candidate to spend time presenting a health lesson in the classroom.
NURS 187, School Nurse Practicum II, Spring 2010 (32 responses out of a class of 32)	
Positive comments from candidates regarding course: All 32 responders included positive comments or rated the course favorably. Positive responses can be found in returned evaluations completed by candidates, i.e., "program enhanced knowledge," "really enjoyed the class," "Don't change a thing."	
Complaints/Suggestions	Faculty response
Most significant complaint: Workload issue. Clinical and writing expectations stressful (3) 9% of responder	See previous comments NURS 186, fall 2009.
More time with preceptor, less theory	No changes. It is important to balance practicum experience with an understanding of theory as it relates to practice. Candidates need to know the basis for their practice.
Difficulty working and arranging time with preceptor away from candidate's worksite.	Faculty realizes this can be a problem area and tries to ease the problem. In each practicum syllabus there is a memorandum to employers of working candidates, which candidates are encouraged to share with their employer, which explains the need for the student to be away from their worksite for their practicum experience. The candidate is also urged to meet with their preceptor to plan a schedule they will work for all parties.

School Nurse Supervisor Survey

On Program Effectiveness

2009-2010

Includes:

(1) Survey

(2) Data Analysis

District directors of health services/school nurse supervisors are asked to rate the effectiveness of the program related to performance of school nurses under their supervision based on the nine CCTC 2007 program standards using a 5-Likert scale. Sent to school nurse supervisors 1 year of employed graduates after candidate has completed program and obtained a Clear School Nurse Services Credential.

1. SURVEY

CSUF School Nurse Services Credential Program SCHOOL NURSE SUPERVISOR SURVEY OF PROGRAM EFFECTIVENESS FALL 2008 through SPRING 2010

Rate the following program standards on program effectiveness in preparing profession school nurses

Program Standard 1: Program Design

The program prepares candidates to understand contemporary conditions of schools and society and how school nursing services need to change and evolve to address these changing conditions. The design of the program is based on a clearly stated rationale that has a sound theoretical and scholarly foundation anchored to the knowledge base of school nursing.

Rate level of student preparedness to understand contemporary issues in school nursing practice:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 2: Collaboration in Implementing the Program

Sponsors of the program establish collaborative arrangements with other institutions and entities that contribute substantively to the quality and effectiveness of the design and implementation of candidate preparation. These arrangements address significant aspects of professional preparation, and include collaboration between school nurse preparation program providers and local education agencies.

Rate effectiveness of collaborative efforts in arranging purposeful and appropriate clinical sites for candidates:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 3: Relationships between Theory Research and Practice

By design, the program provides a variety of opportunities for candidates to reflect, analyze, and implement the relationships between learned theory and evidence based practice in clinical experience. It is evident that candidates examine nursing, education, other theories and research, and their relationship to student health and wellness; school and community health; and student achievement.

Rate program's effectiveness preparing candidate knowledge of theory and research as it relates to evidence based practice:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 4: Preparation to Promote Student Health and Wellness

The program prepares candidates to integrate health and wellness concepts in the educational setting to allow students to be in school, healthy, and ready to learn. Candidates are knowledgeable about primary

(disease prevention and health promotion), secondary (health screening, emergency, and acute care) and tertiary (rehabilitative or palliative care) levels of health care intervention as these relate to students and their families.

Rate program's effectiveness in preparing candidates to integrate health and wellness concepts in school nurse practice:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 5: The Sociocultural Context of School Nursing

The program provides candidates with opportunities to further develop their understanding of the sociocultural context in which school nurses work. As part of these opportunities, candidates experience the range of diversity represented within the local community including culture, ethnicity, language, age, gender, gender identity, students with special needs, socioeconomic status and value systems.

Rate program's effectiveness in developing student understanding for the sociocultural context and insight into meeting the health care needs of a diverse population in their school nursing practice:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 6: Legal and Ethical Aspects of School Nursing Practice

The program provides candidates with an understanding of the local, state and federal laws and regulations applicable to the practice of school nursing. The program assists candidates to understand the practice of school nursing within a public educational system, including the structure and authority of school district administration, the scope and practice of school nursing as regulated by the California Board of Registered Nursing, applicable sections of the Education Code, and/or other relevant local, state, and federal codes and regulations.

Rate the program's effectiveness in providing candidates with insight into the public education system and knowledge and use of legal guidelines in school nursing practice:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 7: Preparation for Health Management Responsibilities within School Setting

The program helps candidates understand the school nurse's role in providing health leadership and management, health education, direct client care, training and supervision of other personnel as applicable, and planning and coordination of healthcare services and programs. This includes emphasis on effective communication skills, team participation, and application of knowledge of the standard nursing process as it relates to assessment in order to reduce barriers to student learning.

Rate the program's effectiveness in preparing candidates to understand health management responsibilities:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 8: Field Work Experience

The program provides candidates with a broad range of hands-on school nurse field experiences in a variety of settings. Candidates are provided with a preceptor for mentoring and supervision during the field experiences. Working collaboratively, course instructors and preceptors encourage and enable candidates to function appropriately and effectively in a school nurse role.

Rate the program's effectiveness in working with agencies to provide quality hands-on field experience:

Excellent Good Fair Poor **(Highlight your response.)**

Program Standard 9: Assessment of Candidate Competence

The program provides preceptors with a comprehensive syllabus , faculty support and assistance in evaluating candidate competence, as well as comprehensive evaluation tools relevant to current CCTC (California Commission on Teacher Credentialing) program standards to assist in assessing and evaluating candidate competence in a full range of clinical experiences related to school nursing practice.

Rate the program's effectiveness in providing assistance, supervision, and relevant tools to effectively evaluate candidate competence in school nursing practice:

Excellent Good Fair Poor **(Highlight your response.)**

Your Over-All Opinion of the Effectiveness of the Program in Preparing School Nurses

Are you satisfied that program has adequately prepared your school nurse(s) to fulfill the role of the professional school nurse in meeting the healthcare needs of students in you school district(s)? Do the program standards above (CCTC standard guidelines) cover all of the critical program elements that are necessary to prepare effective School Nurses?

Rate the program's effectiveness in adequately preparing the candidate to competently practice school nursing:

Excellent Good Fair Poor **(Highlight your response.)**

You are invited to include comments and/or suggestions for program improvement on a separate sheet of paper and send along with responses to survey. Email to Beverly Miller, Program Coordinator, at bmiller@csufresno.edu Thank you!

2. DATA ANALYSIS

SCHOOL NURSE SUPERVISOR SURVEY 2008-2009

(One year following candidate graduation.)

Survey sent in July 2010 to school nurse supervisors in school districts/COEs that employ school nurses who completed the credential program in the academic year 2008-2009 or prior. Districts surveyed who employ graduates from the program : San Jose USD, Modesto City Schools, Tulare COE, Madera COE, Madera USD, Fresno USD, Clovis USD, Central USD, Tulare COE, Visalia USD, Corcoran USD, Bakersfield City Schools, Los Angeles USD. 36 candidates completed the program in spring 2009.

Rate program effectiveness in preparing professional school nurses based on 2007 CCTC standards				
11 Out of 12 School Nurse Supervisors responded to the survey				
Rating: 4 = Excellent; 3 = Good; 2 = Fair; 1 = Poor				
Program Design 1: The program prepares candidates to understand contemporary conditions of schools and society and how school nursing services need to change and evolve to address these changing conditions.	9 82 %	2 18 %	0	0
Collaboration in Implementing the Program 2: The program establishes collaborative arrangements with other institutions and entities that contribute substantively to the quality and effectiveness of candidate preparation..	9 82 %	2 18 %	0	0
Relationships between Theory Research and Practice 3: The program provides a variety of opportunities for candidates to reflect, analyze, and implement the relationships between learned theory and evidence based practice in clinical experience.	10 91 %	1 9 %	0	0
Preparation to Promote Student Health and Wellness 4: The program prepares candidates to integrate health and wellness concepts in the educational setting. Candidates are knowledgeable about primary, secondary, tertiary levels of health care intervention as these relate to students and their families.	10 91 %	1 9 %	0	0
The socio-cultural Context of School Nursing 5: The program provides candidates with opportunities to further develop understanding of the socio-cultural context, including students with special needs, socioeconomic status and value systems.	10 91 %	1 9 %	0	0
Legal and Ethical Aspects of School Nursing Practice 6: The program provides candidates with an understanding of local, state, and federal laws and regulations applicable to the practice, including practice within a public educational system.	9 82 %	2 18 %	0	0
Preparation for Health Management Responsibilities in the School Setting 7: The program helps candidates understand the school nurse's role in providing health leadership and management, health education, direct client care, training and supervision of other personnel, and planning and coordination of healthcare services and programs.	7 64 %	3 27 %	1 9 %	0

Program Standard 8: Field Work Experience 8: The program provides candidates with a broad range of hands-on school nurse field experiences in a variety of settings. Candidates are provided with a preceptor for mentoring and supervision during the field experiences. Course instructors and preceptors work collaboratively to mentor and enable candidates to function effectively in a school nurse role.	10 91 %	1 9 %	0	0
Program Standard 9: Assessment of Candidate Competence 9: The program provides preceptors with a comprehensive syllabus , faculty support and assistance in evaluating candidate competence, as well as comprehensive evaluation tools to assist in evaluating candidate competence in a full range of clinical experiences.	8 73 %	3 27 %	0	0
Share Your Opinion of Overall Effectiveness of the Program in Preparing candidates. Are you satisfied that program has adequately prepared your school nurse(s) to fulfill the role of the professional school nurse in meeting the healthcare needs of students? Do the program standards cover critical program elements needed to prepare effective School Nurses?	9 82 %	2 18 %	0	0

Summary of findings:

In the Likert scale of 4-1 (4 = “Excellent,” 3 = “Good,” 2 = “Fair,” and 1 = “Poor”).

82% of school nurse supervisors rated overall program effectiveness in the “Excellent” category.
18% of school nurse supervisors rated overall program effectiveness in the “Good” category.

In the area of specific categories (1-10)

The one category that received at 9% “Fair” rating was (#7) “Preparation for Health Management Responsibilities in the School Setting” specifically as explained by the SN supervisor was in the area of providing “health leadership” beyond the Health Office.

Program Response:

Currently, in NURS 186, School Nurse Practicum I, and NURS 187, School Nurse Practicum II, candidates are given the option to choose to spend up to 10 hours of their clinical time involved in a leadership project outside of the Health Office. This may be involvement in a health related community activity, developing a health fair, working with management to prepare for a possible epidemic, i.e., HINI, etc.

Solution:

Participation in a health related leadership role outside of the Health Office will become a required experience for all candidates in at least one practicum course.

KSOEHD

NCATE UNIT

Program Evaluation upon Exit

2008-2009 and 2009-2010

Includes:

- (1) Evaluation Tool**
- (2) Candidate Demographics**
- (3) Data Analysis**
- (4) Graduate Comment and Program Responses**

Candidates indicate responses to 15 questions related to program effectiveness and preparedness to function in a full-time professional role using a 5-1 Likert scale. Completed by candidates upon completion of program

1. EVALUATION TOOL

KREMEN SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT

NCATE UNIT - Program Evaluation upon Exit

This survey is being administered by the Kremen School of Education and Human Development at California State University, Fresno, for the purpose of evaluating the effectiveness of all of our nationally accredited programs. Your cooperation in completing the survey will help to improve the educational programs for future students. Thank you.

(Demographics section not included here. See Knowledge Base Pre-Assessment Questionnaire)

As a result of your preparation, please mark items 1 to 15 indicating how well prepared you are after completing our most recent degree and/or credential program at Fresno State.

	Not Applicable	Very inadequate preparation	Less than adequate preparation	Adequate preparation	More than adequate preparation	Excellent preparation
1. I am prepared to use techniques to build rapport with students/clients.	☐	☐	☐	☐	☐	☐
2. I was taught how to organize my professional tasks.	☐	☐	☐	☐	☐	☐
3. I am prepared to respond with fairness to disabled, ethnically and linguistically diverse students/clients.	☐	☐	☐	☐	☐	☐
4. My preparation has upheld the concept that all individuals can learn.	☐	☐	☐	☐	☐	☐
5. I have proper theoretical grounding in my field.	☐	☐	☐	☐	☐	☐
6. I am familiar with the research in my field.	☐	☐	☐	☐	☐	☐
7. I have related my learning to actual situations in schools/professional settings.	☐	☐	☐	☐	☐	☐
8. I can assess/evaluate the progress of students/clients.	☐	☐	☐	☐	☐	☐
9. I know how to conduct myself in accordance with professional ethics and standards.	☐	☐	☐	☐	☐	☐
10. I have skills to successfully collaborate with others in the workplace.	☐	☐	☐	☐	☐	☐
11. I reflect upon and assess my own performance.	☐	☐	☐	☐	☐	☐
12. I feel that I received a helpful and appropriate amount of supervision/advisement.	☐	☐	☐	☐	☐	☐
13. I can think critically about theory and research in my field and put it into practice.	☐	☐	☐	☐	☐	☐
14. My preparation has modeled the value of life long learning.	☐	☐	☐	☐	☐	☐
15. Indicate the degree to which you feel prepared to assume a full-time position.	☐	☐	☐	☐	☐	☐

In the space provided below, please indicate the major strengths of the program:

A.
B.
C.

Suggestions for potential program changes:

A.
B.
C.
D.

Date Survey Completed (month/day/year)_____

2. DEMOGRAPHICS ON GRADUATES FOR 2008-2009 and 2009-2010

Statistics are base on responses from 44 out of 50 responders who completed demographic information.														
Male/Female			Age			Ethnicity			University			Work while in program		
Female	43	98%	20-29	0	0%	White	26	59%	CSUF	5	11%	Full-time	39	89%
Male	1	2%	30-39	12	27%	African Amer.	0	0%	Other CSU	10	23%	Part-time	5	11%
			40-49	11	25%	Hispanic	5	11%	Other	29	66%	Un-Employ	0	0%
			50 +	21	48%	Asian/Pacific Islander	9	20%						
						Other	4	9%						

Note that 48% of the candidates fell into the 50+ age range, and that 89% of candidate worked full time while taking coursework in the program. This needs to be taken into consideration with regard to stress factors and complains regarding workload in the program.

3. DATA ANALYSIS

KSOEHD NCATE Unit – Program Evaluation Upon Exit Survey (by graduate)

Surveys relates to following academic years, 2008-2009 and 2009-2010

(11graduates completing the program for year 2009-2010 did not respond to this survey.)

Rating key: 5 = Excellent preparation; 4 = More than adequate preparation; 3 = Adequate preparation; 2 = Less than adequate preparation; 1 = Very inadequate preparation; 0 = No response to question														
		29 Respondents						21 Respondents						
		2008-2009						2009-2010						
No	Exit Survey Questions	5	4	3	2	1	0	5	4	3	2	1	0	
1	I am prepared to use techniques to build rapport with students/ clients.	17	12	0	0	0	0	13	8					
		59 %	41 %					62 %	32 %					
2	I was taught how to organize my professional tasks.	14	13	2	0	0	0	13	6	2				
		48 %	45 %	7 %				62 %	29 %	9 %				
3	I am prepared to respond with fairness to disabled, ethnically and linguistically diverse students/clients.	18	9	2	0	0	0	13	6	2				
		62 %	31 %	7 %				62 %	29 %	9 %				
4	My preparation has upheld the concept that all individuals can learn.	21	7	1	0	0	0	15	3	3				
		72 %	25 %	3 %				72 %	14 %	14 %				
5	I have proper theoretical grounding in my field.	18	11	0	0	0	0	13	4	4				
		62 %	38 %					62 %	19 %	19 %				

6	I am familiar with the research in my field.	13 45 %	14 48 %	2 7 %	0	0	0	12 57 %	6 29 %	2 9 %	1 5 %		
7	I can assess/evaluate the progress of students/clients.	21 72 %	8 28 %	0	0	0	0	16 76 %	3 14 %	2 10 %			
8	I can assess/evaluate the progress of students/clients.	18 62 %	10 35 %	1 3 %	0	0	0	16 76 %	3 14 %	2 10 %			
9	I know how to conduct myself in accordance with professional ethics and standards.	22 76 %	7 24 %	0	0	0	0	16 76 %	5 24 %				
10	I have skills to successfully collaborate with others in the workplace.	23 79 %	6 21 %	0	0	0	0	17 81 %	3 14 %	1 5 %			
11	I reflect upon and assess my own performance.	20 69 %	9 31 %	0	0	0	0	16 76 %	4 19 %	1 5 %			
12	I feel that I received a helpful and appropriate amount of supervision/advisement.	19 66 %	9 31 %	1 3 %	0	0	0	15 71 %	5 24 %	1 5 %			
13	I can think critically about theory and research in my field and put it into practice.	15 52 %	14 48 %	0	0	0	0	15 72 %	3 14 %	3 14 %			
14	My preparation has modeled the value of lifelong learning.	24 83 %	5 17 %	0	0	0	0	15 72 %	3 14 %	3 14 %			
15	Indicate the degree to which you feel prepared to assume a full-time position.	26 90 %	2 7 %	0	0	0	1 3 %	15 71 %	4 19 %				2 10 %

Summary of findings:

In 2008-2009, when combining categories 5 “Excellent Preparation,” and 4,” More than Adequate Preparation,” 93% to 100% of candidate responses to the 15 questions fell into these two categories. Between 3% and 7% of graduate responses fell into category 3 “adequate.”

In 2009-2010, when combining categories 5 “Excellent Preparation,” and 4 “More than Adequate Preparation,” 86%-95% of candidate responses to the 15 questions fell into these two categories. Between

5% and 14% of graduate responses fell into category 3 “adequate.”

The lowest rating was reported in #6, “I am familiar with the research in my field,” where 5% of graduates rated #6 as category 2 “Less than adequate Preparation.”

Currently, in core school nurse courses, candidates asked to respond to weekly questions specific to school nursing in which they must resort to reading articles in the *Journal of School Nursing*, many of which are related to current research in school nursing; One week in NURS 187, School Nurse Seminar, is devoted to research in school nursing; candidate decision making in clinical experience must also be based on research findings; candidates are encouraged to look for involvement in research opportunities in their clinical practice; as an assignment, candidates have an option of writing a research paper specific to school nursing practice.

Solution:

To strengthen insight into research school nursing, candidates will be asked to write a paper discussing current research in school nursing practice and how it benefits the candidate in his/her own school nursing practice.

4. RESPONSE TO COMMENTS

CANDIDATE EXIT COMMENTS REGARDING PROGRAM

Major Strengths of Program
“Online great! Faculty available.”
“How comprehensive it was. To be able to exchange professional experiences with other nurses in the program was invaluable. Everything we learned was taught from the perspective of how we could apply it to our practice which made the learning more realistic and applicable.”
“Faculty are excellent instructors. They recognize that many of us are working full-time, have children, and sometimes encounter unforeseen life challenges. (My husband had stage 4 throat cancer). I had never been a distance learner and they were able to walk me through the beginning learning curve necessary to participate on Blackboard.”
“Beverly Miller has put together a terrific program which is very inclusive of many aspects we face as school nurses. I have learned where to gain information and where to research and find needed information. I have learned a lot.”
“One of the major strengths of the program is the discussion and sharing of ideas on Blackboard with other school nurses in other districts throughout the state. Another strength, the hands on experience at different settings within your district, and that you get equal experience in both elementary and secondary settings.”
“The program is designed to meet the specific needs of school nurses. It also allows a person to work and take the classes at the same time.”
“Having a preceptor in my area was very helpful in helping me gain access to secondary school programs in my district. Her help and the availability of my professor as needed was quite valuable.”
“Communication with other professionals who are taking an online program. I was much more involved in responding and reading the comments of others than I would be in a classroom.”
“The School Nurse Credential Program offered many opportunities to collaborate with peers, access research articles related to current school nursing issues and engage both required and choice learning. I feel prepared to tackle the job ahead with renewed knowledge and empowerment.”
“The major strengths of the program include covering all aspects of school nursing both in the elementary level and secondary lever. This program prepares the school nurse and provides the guidance needed to

experience many different situations that can occur in the school setting. It teaches the school nurse theoretically as well as clinically. I really learned a lot from this program.”	
“Flexibility, self-motivating, instructor availability. Every assignment had the goal of imparting very specific information in furthering my expertise in that area. The assignments were graded in a timely manner. The instructors were available for questions and concerns. The instructors were fair and understanding.”	
“Effective rapport of our clinical instructors. The goals and objectives were met effectively. Instruction, communication and collaboration with staff and students in the program. I was able to complete my credential while working full-time.”	
“Ms. Miller was always available and worked hard to make the assignments meaningful. If there was a problem, she was willing to alter the assignment to meet the needs presented.”	
Discussion with other classmates provided greater insight into the diversity and complexity of school nursing.	
“Madden Library resources – greater accessibility electronically.”	
Suggestions for Potential Program Changes	
“It would be helpful to have less written work and depend more heavily on Blackboard participation.”	10% - Five (5) out of 50 candidates that exited the program in spring 2009 and spring 2010 commented on the amount of written work that candidates are required to do in the program. Program faculty realizes that candidates in the program are adult learners with complicated busy lives, the majority of whom are working full-time. • Faculty carefully monitors candidates who appear to be having difficulty and works with them to succeed. • Faculty continues to strive to streamline assignments and reduce written workload where ever possible without jeopardizing the learning experience. • When counseling candidates before begin coursework, candidates are encouraged to consider their personal constraints and plan accordingly with regard to the number of classes they can comfortably take. Examples of reducing workload: • Candidates are allowed to choose between written assignments, then share papers on Blackboard with classmates to enhance others learning. • Discussion participation on Bb has been reduced to a minimum, requiring that candidates only have to respond to one other classmate, plus respond to the case scenario following Bb presentations. • A weekly research question is omitted the week that a candidate and partner do their Bb presentation. Consideration is being
“With all the work that we put into this program, we should be able to have credits towards a Master’s degree.”	
“Too much writing. I spent every night at my computer and all weekends just to get the assignments completed to my satisfaction.”	
“Consider reducing the number of weekly responses. Since the number of students was quite high for this type of program, there was a lot of interaction that needed to occur each week. Add to that the number of papers that needed to be written, at times it was very overwhelming.”	
“I felt very pressured to get the amount of work completed while working full-time. While I don’t believe the curriculum should be “watered down” I personally don’t thing I’d recommend taking two courses as I did at once. The reason I did was cost effectiveness (6 units is the same price as 3).”	

	given to allowing candidates to omit the previous weekly research question as well. • Journaling in practicum courses has been streamlined to do away with long narratives. • A written assignment specific to SARB has been changed from a required paper to response to a journal question. • Candidates are expected to create their own clinical goals and objective in keeping with their experience and learning needs.
“I had made suggestions last semester for possible changes in the amount of Blackboard participation and there was a change in this area which I was happy about. I have no suggestions this semester.”	This is an example that demonstrates that program faculty reads through and responds to candidate concerns/suggestions and makes realistic changes to reduce candidate workload in the program.
“Using the argument that your district is getting a credentialed nurse out of the deal no longer has meaning when credentialed nurses are being let go by many districts in my area. Perhaps an amount of the hours could be obtained at your own school site doing new things under the guidance of your preceptor.”	Faculty realizes this can be a problem area and tries to ease the problem. In each practicum syllabus there is a memorandum to employers of working candidates, which candidates are encouraged to share with their employer. This explains the need for the student to be away from their worksite for their practicum experience. Faculty is also available to speak with employers to clarify the need. The candidate is also urged to meet with their preceptor to plan a schedule that will work for all parties.
“It would be helpful to future students if their clinical time could be spent in their workplace. I am a special education nurse and had to take time off from my own work assignment to complete 160 hours of practice in another school district. This place hardship on my fellow nurses who had to cover my sites.”	There is a need for close monitoring of clinical activities in this online program. Candidates are not allowed to use their employee work time for practicum hours as a student. Working away from their worksite gives the student the opportunity to concentrate on learning without job interference. It also allows the student to observe their preceptor involved in office management, case management, etc. In the case of the candidate whose employment takes place in special education, this candidate needs to have a rounded school nursing experience in other areas away from special Ed. Explanation of hours: Guidelines for hours related to clinical courses are the same as those for other nursing courses in the university. There are a total of 135 hours for each three (3) unit practicum course. Of those 135 hours, 15 hours are devoted to class discussion relevant to clinical practice (leaving 120 hours). Candidates who are employed as school nurses are automatically given 40 hours credit for experience (leaving 80 hours). Ten (10) hours are allotted to

	community activities relevant to school nursing and ten (10) hours are allotted to attendance at school nurse workshops and conferences (leaving 60 hours). Candidates who have worked in school nursing for two (2) years are allowed to use up to 20 hours of that time on a special project relevant to school nursing. The remainder of time, 40 hours, must be spent away from the candidate's worksite working and learning under a qualified school nurse preceptor. Faculty believes this is the very minimum amount of acceptable time that needs to be spent working with a qualified preceptor away from the candidate' worksite. Note: Other candidates have expressed the need for more clinical practice time with their preceptor.

SUMMARY OF RESULTS
of
Analysis of Assessment Data
and
Use for Program Improvement

SUMMARY OF RESULTS OF ANALYSIS OF ASSESSMENT DATA

Candidate Preparedness	
Data identifying how well candidates are performing.	Where candidates are not performing as expected or noted weaknesses in program.
1 Pre-Post Knowledge Base Questionnaire	
Data shows that candidates, whether experienced in school nursing practice (3-4 yrs) or those with 2 or less years of school nursing practice, made significant self reported gains in knowledge in the time between taking the pre and post Knowledge Base Questionnaire that covers subject matter in the program. Participants started with the greatest knowledge in Content Clusters 16 (Child abuse), 23 (State mandated screening), and 24 (Immunization requirements). <u>Nevertheless</u>, significant gains in reported knowledge were made as a result of the program courses. Candidate comments were positive related to topics covered: "Reported as beneficial" - 69 topics;	Data analysis revealed no significant curriculum weaknesses. Candidate comments, "Like to see covered" – 15 topic that related specifically to the curriculum and practicum experience. Others mentioned did not fit criteria. As can be seen on Figure 1 (Sec. 5, p. 12), participants started the program least knowledgeable about Content Cluster 10 (School phobia/school refusal) and Content Cluster 14 (Neurological screening tests). The gains in these two content areas were good, but remained the lowest areas in the post knowledge assessment. <u>However</u>, the post ratings were at or near the range of very good knowledge levels on the five-point rating scale.
2 NURS 186 (Elementary) Preceptor Checklist of Skills and Competencies (5 Point Likert Scale)	
Preceptors rating candidate clinical performance as 5 "Excellent" (88%) or 4 "Very Good" (12%). 100% of candidates were reported as meeting skills and competencies.	None noted
3 NURS 187 (Secondary) Preceptor Checklist of Skills and Competencies (5 Point Likert Scale)	
Preceptors rated candidate clinical performance as 5 "Excellent" (94%) or 4 "Very Good" (6%). 100% of candidates were reported as meeting skills and competencies.	None noted
4 Preceptor Evaluation of Candidate Professional Dispositions (5 Point Likert Scale)	
In 2008-2009 and 2009-2010 preceptors rated candidate dispositions in both NURS 186 (elementary) and NURS 187 (secondary) as 5"Excellent," ranging from 81% to 100% of the time, or 4"Very Good" ranging from 9%-19% of the time. In fall 2008, 3% of preceptors rated candidates as 3 "Good" in the area of "Enthusiasm for life-long learning."	None noted

Program Effectiveness	
1	NURS 186 and NURS 187 Course Evaluation by Preceptor (4 Point Likert Scale)
Preceptors rated NURS 186 (elementary) as “Very Pertinent,” F 2008, 66% and F 2009, 85%; or “Pertinent,” F 2008, 34% and F 2009, 15%. Preceptors rated NURS 187 (secondary) as “Very Pertinent,” S 2009, 64% and S 2010, 75%; or “Pertinent,” S 2009, 21% and S 2010, 15%. Note significant increase in preceptors who rated courses as “Very Pertinent” over “Pertinent” from 2008-2009 to 2009-2010.	3% of preceptors rated NURS 187 practicum in spring 2009 as (2) “Fairly Pertinent.” However, no ratings fell into this category in 2009-2010.
2	Candidate rating of Seminar Courses – NURS 184 and NURS 185 (5 Point Likert Scale)
Candidates rating both school nurse seminar courses as 5“Excellent” or 4“Very good” <u>at least 96% of the time.</u> Between 3-6% of candidates rated courses as 3“Good.”	Major complaint in seminar courses, “Heavy workload” with regard to writing requirements. In NURS 184, fall 2008, 31% of responders complained as compared to 13% in fall 2009. In NURS 185, spring, 23% complained, as compared to 0% in spring 2010. Note significant improvement between 2008-2009 and 2009-2010, as a result of faculty changes made in writing requirement.
3	Candidate rating of Practicum Courses – NURS 186 and NURS 187 (5 Point Likert Scale)
Candidates rating all four core school nurse courses, both seminars and practicum as 5“Excellent” or 4“Very good” <u>94% - 100% of the time.</u> Between 3-6% of candidates rated courses as 3“Good.”	Major complaint in practicum courses, “To much writing requirement for assignments and journaling.” In NURS 186 (elementary), fall 2008, 15% of responders complained, as compared to 14% in fall 2009. In NURS 187 (secondary), spring 2009, 0% of responders complained, as compared to 9% in spring 2010. Second ranked complaint, “Question as to why practicum experience cannot be carried out at candidate place of employment. In NURS 187 (secondary) 8% or candidates asked this question. See “Use of Assessment Results for Program

	Improvement.”
4 School Nurse Employer/Supervisor - Survey 2008-2009	
82% of school nurse supervisors rated overall program effectiveness in the “Excellent” category. 18% of school nurse supervisors rated overall program effectiveness in the “Good” category.	9% of district/COE SN supervisors rated # 7 “Preparation for Health Management Responsibilities in the School Setting” as “Fair.” Specifically the SN global leadership role outside the health office. See “Use of Assessment Results for Program Improvement.”
9 Program Evaluation Upon Exit Survey by Graduate	
Among spring 2009 graduates, 93% to 100% of responses to the 15 questions fell into 5 “Excellent Preparation” and 4 “More than Adequate Preparation.” Between 3% and 7% fell into the “Adequate” category. Among spring 2010 graduates, 2009-2010, 86% to 93% of responses to the 15 questions fell into the 5 “Excellent” and 4 “More than Adequate category. Between 5% and 14% fell into the “Adequate” category. It is unsure why more graduates responses fell into the “Adequate” category in spring 2010 than spring 2009, as no significant program or curriculum changes were made between fall 2008 and spring 2010.	5% of candidates rated #6, “I am familiar with the research in my field” as 2 “Less than Adequate Preparation.” (See next section for comments/changes)
Summary of Findings: <u>Analysis of data reveals that overall the program is doing a “more than adequate” job of meeting the educational and clinical experience needs of candidates.</u> The majority of candidates were very satisfied with their educational preparation, as were employers-school nurse supervisors. Preceptors have also reported receiving good support from faculty and had no suggestions for improving their preceptor experience. In the following section, four areas will be discussed related area of complaint and program plans for change: (1) 5% of graduates indicated they had “less than adequate preparation” in the area of “familiarity with research in the field of school nursing.” (2) School nurse supervisors perceived the program as meeting the needs of their employees, with the exception of one area where 9% of employer-school nurse supervisors felt candidate experience could be strengthening in the area of “Preparation for Health Management Responsibilities in the School Setting 7,” specifically in the area of health leadership beyond the Health Office. (3) Candidate complaints regarding “workload,” changes that have already made a difference and continued monitoring and improvements. (4) Candidate complaints about the need to spend practicum hours away from place of employment.	

USE OF ASSESSMENT RESULTS FOR PROGRAM IMPROVEMENT

Four areas addressed that were noted in Summary of Results of Analysis of Assessment Data

1. KSOEHD “Program Evaluation upon Exit Survey” completed by graduates.
5% of graduates indicated “less than adequate preparation” in (#6) “familiarity with research in the field.”

Program Response:

Currently, in core school nurse courses, candidates asked to respond to weekly questions specific to school nursing in which they must resort to reading articles in the *Journal of School Nursing*, many of which are related to current research in school nursing; One week in NURS 187, School Nurse Seminar, is devoted to research in school nursing; candidate decision making in clinical experience must also be based on research findings; in NURS 186, School Nurse Practicum I, and NURS School Nurse Practicum II, candidates are asked to read a journal research article with application to their school nursing practice; and candidates are encouraged to look for involvement in research opportunities in their clinical practice. In NURS 185, School Nurse Seminar, candidates have an assignment option of writing a research paper specific to current school nursing practice.

Solution:

Faculty believes that current research is well covered in the program. However, in NURS 185, to strengthen insight into research in school nursing, candidates will be given the opportunity to respond to a question that write a paper discussing current research in school nursing practice and how it benefits the candidate in his/her own school nursing practice.

Program Response:

It should be noted that candidate suggestions in “Like to See Covered” will be discussed by faculty and, if appropriate, will be incorporated as prompts for discussion in seminar or practicum courses.

2. “School Nurse Supervisor Survey” completed by Employer-School Nurse Supervisors.
9% of employer-school nurse supervisors felt candidate experience could be strengthened in (#7) “Preparation for Health Management Responsibilities in the School Setting,” specifically in the area of health leadership beyond the Health Office.

Program Response:

Currently, in NURS 186, School Nurse Practicum I, and NURS 187, School Nurse Practicum II, candidates are given the option of spending up to 10 hours of their clinical time involved in a leadership project outside of the Health Office. This may be involvement in a health related community activity, developing a health fair, working with management to prepare for a possible epidemic, i.e., HINI, etc.

Solution:

Faculty recognizes that the school nurse must think “outside the box” and must understand that his/her role must extend into the school community. Therefore, the leadership experience will become strengthened to require that all candidates, both in NURS 186, School Nurse Practicum I, (elementary) and NURS 187, School Nurse Practicum II, (secondary) will participate in a school health leadership role activity beyond the Health Office that benefits the school community. Candidates will be allowed to take ten clinical hours to participate in this activity.

3. “Candidate Evaluation of course,” core school nurse courses – NURS 184, 185, 186, 187
 Candidate complaints about reading and writing requirements in core school nurse courses.
NURS 184, Intro to School Nursing, fall 2008 – 31% complained compared to 13% in fall 2009.
NURS 185, Seminar in SN, spring 2009 – 23% complained compared to 0% in spring 2010.
NURS 186, School Nurse Practicum I, fall 2008 – 15% complained compared to 14% in fall 2010.
NURS 187, School Nurse Practicum II, spring 2009 – 0% complained compared to 9% in spring 2010.

Program Response:

It should be noted that 48% of responders who completed the KSOEHD Exit Survey in spring 2009 and spring 2010 fell into the age range of “50 and above.” It should also be noted that 89% of candidates work full- time as school nurses. Program faculty is very aware of the fact that the majority candidates in the program are “older” adult learners with complicated busy lives. Faculty is also aware of the fact that younger candidates frequently have younger children at home and that emergency situations can arise.

- Faculty carefully monitors candidates who appear to be having difficulty or who have problems turning work in on time, and take the time to work with these candidates to help them succeed.
- Faculty continues to strive to streamline assignments and reduce written workload where ever possible without jeopardizing the learning experience.
- When counseling candidates before begin coursework, candidates are encouraged to consider their personal constraints and plan accordingly with regard to the number of classes they can comfortably take.

Examples of reducing workload:

- Candidates are allowed to choose between written assignments, then share papers on Blackboard with classmates to enhance others learning.
- Discussion participation on Bb has been reduced to a minimum, requiring that candidates only have to respond to one other classmate, plus respond to the case scenario following Bb presentations.
- A weekly research question is omitted the week that a candidate and partner do their Bb presentation. Consideration is being given to allowing candidates to omit the previous weekly research question as well.
- Journaling in practicum courses has been streamlined to do away with long narratives.
- A written assignment specific to SARB has been changed from a required paper to response to a journal question.
- In NURS 186 and NURS 187, candidates have the opportunity to create their own clinical goals and objective in keeping with their experience and learning needs.

The program will continue to find ways to lighten the load for candidate without jeopardizing the learning experience. Note: Data (box above, see “blue”) has shown that efforts by faculty to streamline and reduce the workload, as well support candidates efforts has had significant results in reducing complaints regarding the workload in NURS 184, Introduction to School Nursing and NURS 185, School Nurse Seminar.

4. “Candidate Evaluation of Course,” practicum courses – NURS 187 (secondary)
8% of candidates complained about the number of hours that an experienced school nurse must spend with a preceptor away from their place of employment.

Program Response:

Faculty realizes this can be a problem area and tries to ease the problem. In each practicum syllabus there is a memorandum to employers of working candidates, which candidates are encouraged to share with their employer. This explains the need for the student to be away from their worksite for their practicum experience. Faculty is also available to speak with employers to clarify the need. The candidate is also urged to meet with their preceptor to plan a schedule they will work for all parties.

There is a need for close monitoring of clinical activities in this online program. Candidates are not allowed to use their employee work time for practicum hours, though leadership activities and Experienced School Nurse Projects may take place at the candidate’s worksite with approval of the candidate’s preceptor and clinical instructor. Faculty believes that working away from the candidate’s worksite gives the student the opportunity to concentrate on learning without job interference. It also allows the student to observe their preceptor involved in office management, case management, etc.

In the case of the candidate whose employment takes place in special education, this candidate needs to have a rounded school nursing experience in other areas away from special Ed.

Explanation of hours:

Guidelines for hours related to clinical courses are the same as those for other nursing courses in the university. There are a total of 135 hours for each three (3) unit practicum course. Of those 135 hours, 15 hours are devoted to class discussion relevant to clinical practice (leaving 120 hours). Candidates who are employed as school nurses are automatically given 40 hours credit for experience (leaving 80 hours). Ten (10) hours are allotted to community activities relevant to school nursing and ten (10) hours are allotted to attendance at school nurse workshops and conferences (leaving 60 hours). Candidates who have worked in school nursing for two (2) years are allowed to use up to 20 hours of that time on a special project relevant to school nursing. The remainder of time, 40 hours (one week’s worth of time spread throughout a semester), must be spent away from the candidate’s worksite working and learning under a qualified school nurse preceptor. **Faculty believes this is the very minimum amount of acceptable time that must be spent working with a qualified preceptor away from the candidate’s worksite.**

Note: Other candidates have expressed the need for more clinical practice time with their preceptor.

While data revealed that a very small percentage of responses to surveys and evaluations fell into the “less than adequate” or “fair” range, faculty will never the less continue to strive for “excellence” in all areas of the program recognizing the importance of maintaining a viable school nurse services program that will produce school nurses capable of meeting the healthcare needs of school age children in our communities.

Complete Table of Evaluation Tools

2008-2009 and 2009-2010

Assessment procedures, surveys and evaluation tools used to ensure that candidates have the requisite competencies and that the program is effectively meeting its candidates' academic and professional growth needs.

EVALUATION TOOLS

Candidate Assessment / Program Effectiveness

Assessment procedures and evaluation tools used to ensure candidates have the requisite competencies and the program is effectively meeting candidates' academic and professional growth needs.

Instrument	Description	When Given
Post graduation District School Nurse Supervisor Survey of Program Effectiveness	District directors of health services/school nurse supervisors are asked to rate the effectiveness of the program related to performance of school nurses under their supervision based on the nine CCTC 2007 program standards using a 5-1 Likert scale.	Sent to school nurse supervisors 1 year of employed graduates after candidate has completed program and obtained a Clear School Nurse Services Credential.
KSOEHD Program Evaluation Upon Exit Survey	Candidates indicate responses to 15 questions related to program effectiveness and preparedness to function in a full-time professional role using a 5-1 Likert scale.	Completed by candidates upon completion of program
NURS 186 & NURS 187 (Practicum courses) Preceptor Evaluation of Clinical Course	Questions asked: "How pertinent is the course content to the school nursing experience?" "Are there experiences you would include/eliminate?" "Could changes be made to improve your preceptor experience?"	Completed by preceptor and submitted to program coordinator at the end of the semester.
NURS 184, 185, 186, 187 (Core SN Courses) Course Evaluation by Candidate	Questions asked: "Overall rating of this three unit course." Aspects of the course which have been most valuable?" "Suggested changes that would enhance learning experience?"	Completed by candidates at the end of each course and submitted to program coordinator.
NURS 186 & NURS 187 (Practicum courses) Preceptor Checklist of Skills and Competencies	Program clinical competencies are specifically based on CCTC school nurse competencies: SNC 1, Providing health and wellness services; SNC 2, Providing direct client care services (primary, secondary, tertiary intervention); SNC 3, Professional Management Skills. Competencies under each of these categories must be checked off by the candidate's preceptor as "met." If "unmet," explanation required.	This tool is used to assess competencies and mentor the candidate throughout practicum experience. The preceptor meets with the candidate before the end of the semester to discuss accomplishments, strengths and areas of need. The preceptor completes and signs the evaluation form and submitted it to clinical instructor at the end of the semester before a final grade can be issued to the candidate.
NURS 186 & NURS 187 (Practicum courses) Preceptor Evaluation of Candidate Professional Dispositions	To foster in candidates professional dispositions that are important in meeting the health care needs of school age children. These are: The tendency to reflect, the use of critical thinking, the use of well reasoned ethical judgment, an appreciation for diversity,	School site preceptors observe for these traits in candidates during clinical practice. At the end of the semester, preceptors meet with candidates to discuss these dispositions and to complete and sign the evaluation form which is submitted to the clinical

	a collaborative disposition, and the tendency for life-long learning.	instructor. Instructions included to aid preceptors in completing form.
NURS 184, 185, 186, 187 Pre-post (core school nurse courses) knowledge assessment Knowledge Base Questionnaire (self reported knowledge level)	Candidates are asked to rate their global knowledge of school nursing practice on a 5 point Likert scale. The questionnaire consists of 26 subject areas with specific questions relevant to each subject area. The pre-post assessment gives faculty insight into areas in the curriculum and clinical experience that need further strengthening.	Completed by candidates prior to beginning core school nurse courses and on completion of core school nurse courses.
NURS 186 & NURS 187 (Practicum courses) Final Narrative Self Evaluation	Candidates are asked to write a Final Narrative Self Evaluation upon completion each of the two practicum courses and commenting on the following: Success in attaining goals and objectives (which candidates developed in the beginning of the semester); areas of major learning, insights and skills; what candidate would have done differently to improve his/her learning experience.	Completed by candidate at the end of the each practicum experience (semester).
NURS 184 and NURS 185 (seminar courses) Candidate coursework and class participation monitored and evaluated by faculty	It is possible for candidates to earn up to 100 grade points in a given course (90-100 = A, 80-89 = B, etc.). In seminar courses, written assignments are evaluated by the instructor and grade points are allotted to written assignments, responses to weekly research questions, creation of a Blackboard presentation for classmates, and participation in class discussion.	Each semester is divided into four modules. Completed assignment work is sent electronically at the end of each module. The instructor allots points to candidate work and a progress report is sent to the candidate with comments and a breakdown on points earned. Candidate Blackboard presentations are given a point value by the instructor and classmates are asked to anonymously rate presentation.
NURS 186 and NURS 187 (Practicum courses) Candidate written course work evaluated by clinical instructor	Weekly clinical journaling, other assignments, and candidate class participation are evaluated and points are assigned by the candidate's clinical instructor	Each semester is divided into four modules. Completed assignment work is sent electronically at the end of each module. The instructor allots points to candidate work and a progress report is sent to the candidate with comments and a breakdown on points earned.
NURS 186 & NURS 187 (Practicum courses) Mid-term Conference	The purpose of the conference is to determine candidate progress in completing student goals and objectives, as well as expected competencies. The clinical instructor completes a mid-term progress report which is kept in the candidate's file.	Mid-term conference held at school site where practicum is taking place in the Fresno area or, for distance learners, a 3-way telephone conference takes place between clinical instructor, candidate and preceptor.

Grade Point Average	Candidates are expected to maintain a 3.0 GPA in coursework throughout program coursework.	The program coordinator reviews transcripts of incoming candidates to determine satisfactory GPA before acceptance. The candidate's GPA is monitored throughout program.
On completion of program Exit Interview (Exit paperwork sent to CSUF credential analyst)	The Program Coordinator reviews each candidate's file to determine if the candidate has met program expectations, i.e., satisfactory completion of coursework and clinical competencies. The candidate is counseled on any outstanding work and advised on obtaining a Clear Professional credential and given information on opportunities for continuing education.	The Program Coordinator reviews each candidate's file following his/her completion of program. The candidate is then contacted and invited to participate in an Exit Interview in person or via phone conference. If the candidate has satisfactorily met program requirements, exit paperwork is sent to the CSUF credential analyst.
NURS 186 & NURS 187 (Practicum courses) Candidate evaluation of preceptor experience	Candidates are asked to rate the value they placed on preceptor assistance in developing student goals and learning objectives; planning clinical experiences; with mentoring and supervision; and in accomplishing student goals, learning objectives and meeting clinical competencies. Candidates are asked if they would recommend this preceptor to future credential program students. 1-5 Likert scale used.	Completed by candidate at the end of each clinical experience.
NURS 186 & NURS 187 (Practicum courses) Faculty Teaching Effectiveness Candidate evaluation of faculty/instructor/clinical supervisor	According to university policy, students evaluate faculty in a representative sample of courses each semester using an evaluation form that has been developed by the Dept. of Nursing. The Dept. Chair reviews summaries of evaluations. A report is then placed in faculty personnel file and used to determine reappointment, tenure, and promotion, and teaching effectiveness.	This evaluation form is sent to individual candidates at the end of semester by the Dept. of Nursing. Candidate comments are confidential. Faculty members receive an evaluation report from the Dept. Chair after the end of the semester in which the teaching effectiveness of the faculty member has been evaluated by the candidate.
Faculty Evaluation Faculty Peer Evaluation	All faculty members are evaluated for teaching effectiveness according to procedures, policies, and instruments found in the CSUF <i>Academic Policy Manual</i> and the Department of Nursing <i>Faculty Handbook</i> .	<i>Academic Policy Manual</i> procedures determine the timetable for evaluating tenured, tenure track, and temporary faculty members by peers.

SECTION FIVE

PROGRAM ASSESSMENT SUMMARY

PROGRAM ASSESSMENT SUMMARY

Program Design: The CSUF Post Baccalaureate School Nurse Services Credential Program offers coursework leading to a Clear Professional School Nurse Services Credential. This online program is available to registered nurses who hold a bachelor's degree from a regionally accredited university. The goal of the program is the preparation of competent school nurses through the provision of learning experiences taught by qualified and experienced faculty and university approved school nurse preceptors at school sites in areas of the state in which candidates are located. Of utmost importance is that the program offers quality education that prepares the school nurse candidate with the decision-making skills, based on theory and research, to provide quality healthcare to diverse client populations across environments which includes effective leadership, supervision, management, safe and effective delegation, and application of the nursing process in the school setting. Inherent in the teaching/learning process within the program is the reciprocal responsibility of faculty and candidates in influencing the process of learning outcomes. In this relationship, faculty serves as role models and valuable resources in facilitating the advancement of competence in practice through leadership, research, and scientific inquiry. The learner is expected to exhibit self-direction and a sense of responsibility and accountability in mastering knowledge and skills consistent with professional practice. The experience includes an in-depth school site practicum which requires that the candidate demonstrate professional competencies set forth in the 2007 CCTC *Standards of Quality and Effectiveness for Programs of Professional School Nurse Preparation in California*.

The program is housed in the Department of Nursing within the CSUF College of Health and Human Services. The coordinator of the program holds a Bachelor's Degree in Nursing, a Master's in Public Administration in Health Services and a School Nurse Services Credential and has over 20 years of school nursing experience. Lecturers and clinical instructors who teach in the program hold master's degrees in nursing or nursing administration and have years of school nursing experience, some of whom continue to practice school nursing in the community.

Collaboration and communication within the program, the institution, and with the school nursing community is considered essential to the survival of the program. Because this is an online program, careful attention is given to establishing meaningful partnerships with school districts and Directors of Health Services in schools around the state in order to provide quality clinical experience for candidates. Another essential connection is with the program Advisory Board which is made up of school nurses, school administrators, and other community leaders with a vested interest in school nursing from within the San Joaquin Central Valley. Within the institution, faculty participation in program faculty meetings, as well as Dept. of Nursing faculty meetings and Graduate Curriculum Committee meetings is essential, and certainly participation in scheduled meetings with the Kremen School of Education and Human Development relevant to program accreditation. Faculty also recognizes the importance of involvement in community meetings relevant to school nursing, such as School Health Panel meetings, City/County School Nurse Meeting, California School Nurses Organization state and section conferences, as well as attendance at National Association of School Nurse meeting are in order to stay abreast of current issues in school nursing practice in order to maintain program currency.

The program consists of 28 units and is designed to provide candidates with a well rounded school nursing experience, both didactic and clinical. The program is divided into Phase I and Phase II. Courses in Phase I provide the candidate with the necessary tools needed to participate in a meaningful field experience. Phase II courses are specific to school nursing experience. These courses include both didactic and field experience. Coursework includes the following:

Phase I Coursework	Phase II Coursework
CDDS 125, Audiometry for School Nurses	NURS 184, Introduction to School Nursing
COUN 174, Introduction to Counseling (or COUN 200)	NURS 186, School Nurse Practicum I (elem)
SPED 120, Introduction to Special Education	NURS 185, Seminar in School Nursing (sec)
NURS 136, Health Appraisal (or NURS 180T)	NURS 187, School Nurse Practicum II
NURS 137, Teaching Strategies for the Healthcare Client	
NURS 183, Vision and Scoliosis in the School Setting	

Program changes within the past two years. In fall 2009, a Nurse Practitioner-Credential Combination option was discontinued. This option allowed master's students in the Nurse Practitioner (NP) program the opportunity to combine the NP program with the School Nurse Services Credential Program. Originally this option had been funded by a grant which has since run out. The option did not require that NP students to take a course in health teaching, counseling or special education (mainstreaming) assuming that this subject matter was adequately addressed in the NP program. The fall 2009, Graduate Curriculum Committee in the Department of Nursing determined that these courses provided key tools for school nursing practice and that they needed to be taken by all School Nurse Credential candidates.

In spring 2010 due to the state budget crisis that also affected universities leading to a need to decrease enrollment directly affected the program. The Dean of the College of Health and Human Services and the Chair of the Dept. of Nursing made the decision to move the nursing courses in the program into Special Sessions in Global and Continuing Education. CDDS 125, Audiometry for School Nurses; COUN 174, Introduction to Counseling; COUN 200, Seminar in Counseling Techniques; and SPED, Introduction to Special Education, remain state-side and may be taken through open university. The nursing courses in the program have been sequenced. Beginning in June, candidates will begin by taking NURS 137, Teaching Perspectives for the Healthcare Client; NURS 180T, Physical Assessment for School Nurses; and NURS 183, Vision and Scoliosis Screening in the School Setting, in the summer. Followed in the fall by NURS 184, Introduction to School Nursing; NURS 186, School Nurse Practicum I (elementary); and in the spring, NURS 185, School Nurse Seminar; and NURS 187 School Nurse Practicum II (secondary). The advantage of this change is that candidates do not need to be concerned about enrolling in the university before an early deadline. Previously, potential candidates had been reluctant to enroll in the program out of concerns about pending employment, while others were concerned about their employment status with school districts, fearing lose of their positions due to lay-offs. Now this is no longer an issue with regard to enrolling before an early deadline.

In fall 2010, the STAH (Special Teaching Authorization in Health) was shelved due to a lack of enrollment in the program option since it was approved and placed in the University Catalog in fall 2007. The following may be factors: (1) The state budget crisis which has affected school nurse employment; (2) CSUF does not offer a Master's in School Nursing, which would be a motivating factor for candidates in the program to take the coursework. (3) This is an online program and restriction has been place on distance learners enrolling into the STAH coursework

due to the fact that a university field supervisor must be able to drive within a reasonable distance to meaningfully supervise STAH candidates. Consideration will be given to reinstating the STAH option in the future if evidence of interest in the coursework is rekindled.

Course of Study: The coursework consists of 28 units divided into phase I and Phase II. Phase I includes 16 units: CDDS 125, Audiometry for School Nurses (3U); COUN 174, Introduction to Counseling, (or COUN 200, Seminar in Counseling Techniques) (3U); SPED 120, Introduction to Special Education (3U); NURS 136, Health Appraisal (or NURS 180T, Physical Assessment for School Nurses) (3U); NURS 137, Teaching Perspectives for the Healthcare Client (3U); and NURS 183, Vision and Scoliosis Screening in the school Setting (1U). Candidates may take Phase I courses through other accredited universities with program coordinator approval, though, at least 15 program units must be taken through CSUF, which includes the four 3 unit Phase II core school nurse courses. The following Phase I courses are offered in the summer: NURS 137, Teaching Perspectives for the Healthcare Client; NURS 180T, Physical Assessment for School Nurses; and NURS 183, Vision and Scoliosis Screening in the School Setting. Phase II courses are: NURS 184, Introduction to School Nursing (Seminar); NURS 186, School Nurse Practicum I (Elementary) which are offered in the fall; NURS 185, School Nurse Seminar; NURS 187, School Nurse Practicum II (secondary) which are offered in the spring. Candidates are expected to complete Phase I coursework prior to entering Phase II core nurse courses, which gives them the necessary tools for field experience. Candidates take their practicum in their local area.

In the fall, candidates are required to take NURS 184, Introduction to School Nursing (seminar) prior to or along with NURS 186, School Nurse Practicum I. This is also the case in the spring regarding NURS 185, School Nurse Seminar, and NURS 187, School Nurse Practicum II, as the seminars go hand in hand in giving candidates the necessary insight into legal guidelines, theory, Standards of School Nursing Practice, and multiple school nursing issues that gives the candidate the under-pinning and basis for a meaningful field experience. Before field experience can begin, a University-Agency Agreement must be in place. Candidates are required to spend their field experience working under the direct supervision of a qualified school nurse preceptor away from their place of employment, if employed as a school nurse, to allow for quality supervision.

Each practicum course, NURS 186 (elementary) in the fall and NURS 187 (secondary) in the spring, includes a total of 135 hours. Three hours are set aside for instructor-candidate conferencing and twelve hours are given to online class discussion relevant to school nursing practice. The remaining 120 hours are relegated as follows: Practicing school nurses are given 40 hours credit for experience. Eight-ten hours must be used in community activities, and another ten-twelve hours allow candidates to attend local school nurse workshops and conferences. These activities must be approved by the candidate's preceptor. All candidates are required to become involved in a leadership role activity, up to 10 hours, beyond the Health Office in both practicum courses (elementary and secondary) in order to broaden the candidate's understanding of the school nurse role outside the office and in the school community. Experienced school nurses (2+ years) who are experienced at a given level, i.e. elementary or secondary, may opt to use up to 20 hours for an Experience School Nurse Project instead of a leadership role for one semester at that experienced level. Both the Experienced School Nurse Project and the Leadership Role may be done at the candidates own school site with approval from the preceptor and clinical instructor. The remainder of time, 40-50 hours, for the practicing school nurse must be spent working under the direct supervision of a qualified school nurse preceptor away from

the candidates place of employment. Unemployed candidates must spend a minimum of 90 hours working under the direct supervision of a qualified preceptor. For each practicum, the candidate is asked to create Student Goals and Learning Objectives that coincide with the candidates learning needs. Preceptors are asked to assist the candidate in developing goals and objectives and to take responsibility for assisting the candidate in finding opportunities to meet them.

Communication with between the preceptor and the university clinical instructor begins as soon as the preceptor documentation has been received and approved by the clinical instructor. A phone conference is held and roles and responsibilities are discussed. The importance of on-going communication throughout the semester is stressed. A mandatory mid-term conference between candidate, preceptor and clinical instructor takes place, and other conferences as needed. For candidates in the Fresno and surrounding areas, field supervision/conferences take place at clinical sites. For distance learners, 3-way telephone conferences are held.

Assessment of Candidates: Prior to acceptance into the program the candidate's application is reviewed by the Program Coordinator. Candidates entering the program are expected to have a 3.0 GPA and have applied for a Preliminary School Nurse Services Credential (includes fingerprinting). Potential candidate letters regarding reason for interest in school nursing are reviewed as well as three letters of reference, at least one must be from an employer and other from professionals with insight into the candidate's interest. Before entering Phase II of the program candidates complete a Pre-Knowledge Base Questionnaire specific to knowledge of roles and responsibilities of the school nurse. Upon completing Phase II coursework, candidates complete the Post-Knowledge Based Questionnaire. This assessment gives faculty insight into that has taken place in the core school nurse courses. Candidate written coursework in all courses is evaluated by faculty, points are issued and candidates receive feedback. Candidate participation in online discussion and creation a meaningful Blackboard presentation are also evaluated and points allotted. Candidates are expected to maintain a 3.0 GPA throughout the program. Faculty supports candidate efforts and works with each candidate individually if he/she appears to be struggling. A Mid-Term 3-Way Conference is mandatory for all candidates in practicum courses. During this conference, Student Goals and Learning Objectives are discussed, as well as progress toward meeting clinical skills and competencies. Faculty monitors candidate progress clinical journaling and provides feedback. In both NURS 186 and NURS 187 (elementary and secondary), preceptors are responsible for evaluating candidate ability to competently carry out required skills and competencies in clinical practice and to sign off on the *Preceptor Checklist of Skills and Competencies*. Preceptors are also responsible for assessing the candidate's ability to incorporate Professional Dispositions into their school nursing practice and must evaluate the candidate and sign off on the *Preceptor Evaluation of Candidate Professional Dispositions* assessment form. On completing of program an Exit Interview is held between the candidate and Program Coordinator, in person or via phone, to review accomplishment and discuss any outstanding coursework. Once program requirement have been satisfied final documentation is sent to the university Credential Analyst.