## Course Syllabus

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<table>
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<tr>
<th>Additional faculty</th>
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</table>
| Clinical Faculty - Sandra Leh  
Office: 610-606-4666 ext. 3492  
Cell phone for clinical days 610-202-2738 |
| Clinical Faculty - Jeannie Vogt  
Cell phone for clinical days 610-349-2310 |

### Placement
NURSING 333 Health Promotion of the Community  
Summer 08/09  
Offered Fall, Spring, or Summer Senior Year

### Prerequisites
Successful completion of all core curriculum and nursing pre-requisites.  
Satisfactory completion of all junior level nursing courses and a cumulative GPA of 2.5

- Pre- or co-requisite NUR 331
- RN students pre-requisites NUR 324, NUR 311, NUR 322

### Credit
5 credits

- 3 credits classroom (42 hours)
- 2 credits clinical (84 hours)

### Course Description
This course focuses on the professional role of the nurse in promoting optimal health of individuals, families, and communities. The course content emphasizes epidemiological theories as they relate to the health of the community.

In this course, the community is your client. You will be invited into the homes and neighborhoods in your community. You will have the opportunity to explore some of the exciting roles and responsibilities of community health nurses. In the process, you will develop considerable insight into the nature of community health nursing. This course will help you understand why some people choose healthy lifestyle behaviors while others don't; and what you can do as a nurse to encourage positive health behavior.

You may not become a community health nurse, but the knowledge and experience gained from this course will allow you better recognize and plan for your patients' discharge needs while in the acute care setting. This course
will also help you to adapt to an ever-changing health care environment, regardless of the career setting or specialty you choose.

Upon successful completion of the course, you will:

1. Apply concepts of family and culture to the care of families and communities.
2. Utilize the nursing process in providing care to families and communities.
3. Exercise independent judgment in establishing priorities of care for families and communities.
4. Collaborate with other members of the health care team in providing care to families and communities.
5. Use principles of health education in teaching and counseling of families and communities on aspects of health promotion and health care.
6. Use appropriate community resources in planning, implementing, and evaluating a plan of care for families and communities.
7. Integrate research findings into the plan of care for families and communities.
8. Analyze the community health nurse’s role in emerging patterns of health care.
9. Recognize responsibility for one’s personal and professional role in promoting the health of the community.

Principles of collaborative learning suggest that knowledge is socially constructed by groups of individuals rather than a solitary individual process. Furthermore, collaborative learning stresses the importance of common inquiry in learning, a process through which learners begin to experience knowledge as something that is created rather than something that is transmitted from the professor to the learner. It is understood that adult learners bring with them a unique approach to learning. The desire to be intellectually recognized for life experiences coupled with the need to relate learning content to real world situations supports the benefits of a collaborative learning environment. Additionally, knowledge is shared, discovered, and enhanced rather than imparted on the learner. In a collaborative environment, learning is dictated by personal choice, and credit is earned and not awarded by the professor. This approach to teaching shifts the responsibility of learning on the individual rather than solely on the teacher. Finally, collaborative learning benefits the student by creating an active, positive, and noncompetitive classroom atmosphere.

This type of learning environment will be constructed through the use of a variety of teaching methods and tools including lecture, group discussion, audio-visual materials, case studies, textbook and periodical readings, simulations, role playing, gaming, student presentations, reflective writing, guest speakers, independent research activities, clinical experiences, and sharing of personal/professional experiences.
In order to evaluate your progress in reaching the course objectives and to provide feedback on your learning, you will be evaluated on the following areas:

<table>
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<tr>
<th>Area</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Midterm</td>
<td>15%</td>
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<tr>
<td>Final Exam</td>
<td>20%</td>
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<tr>
<td>Community Assessment</td>
<td>30%</td>
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<tr>
<td>Clinical Reviews</td>
<td>10%</td>
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<tr>
<td>Presentation</td>
<td>15%</td>
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<tr>
<td>Participation and Attendance</td>
<td>10%</td>
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Required Texts


- ATI Content Mastery Series: Review Module - Community Health Nursing, RN ed (will be provided in class)

Honor Code

Students are reminded to review the Honor Code and Plagiarism statements of Cedar Crest College in the college handbook. Plagiarism is defined as using someone else's ideas, summarizing or paraphrasing someone else's words and representing this information as our own. Examples of plagiarism include turning in someone else's paper under one's own name with or without additions or modifications, downloading and turning in a paper from the Internet, or including concepts, phrases, sentences, or paragraphs from print or electronic sources—whether verbatim or paraphrased—in one's own paper without proper attribution.

Let us suppose for example, that we're doing a paper on Florence Nightingale. We learn, through our reading of several sources, that Florence Nightingale is considered the founder of modern nursing. We can, in our own words, state this information without citing a source because it has become what we call "common knowledge". However, if we report on Nightingale's specific contributions to nursing, we must credit the original author. Here is an example: *In 1860, Nightingale established the first nursing school at St. Thomas Hospital in London, England, and the first students began courses on*
June 24, 1860 (Ulrich, 1992).

Either plagiarism or careless scholarship, or both, may result in additional points being taken off the grade of this paper, so that the grade may be lowered down to and including a 0. This includes, but is not limited to omitting quotation marks for a quoted sentence or phrases, even if the rest of the documentation is present.

Penalties for academic dishonesty may be even more severe. See "Academic Dishonesty or Plagiarism" in the Student Handbook.

During exams, the professor or administrator may be present in the room. All belongings must be lined up along the perimeter of the room. Students may not have cell phones, calculators, PDAs, or any other electronic device during an exam. Students may not have any personal possessions with them during the exam such as pencils, erasers, water bottles, or papers. The nursing department will provide writing utensils. Students are not permitted to leave the exam room for any reason during the exam. Please use the rest room prior to the exam. Students who leave the exam room will not be permitted to return. Please see the instructor prior to the day of the exam if special accommodations are needed.

Signing the attendance sheet on behalf of another student who is not present is a violation of the Honor Code.

Classroom Protocol: This classroom will be conducted in accordance with the principles of the Democratic Classroom. To the greatest extent possible, we will be in a position of equality in regards to one another. We acknowledge that the professor brings an expertise with regard both to teaching and the subject matter. However, we also acknowledge the individual expertise of each student and encourage each student to bring their own areas of expertise and experience into the classroom. We also acknowledge the fact that the professor has authority by virtue of her position.

Classroom Behavior - Student Rights and Responsibilities: According to the Statement of Student Rights and Responsibilities: Freedom to teach and freedom to learn are inseparable facets of academic freedom. The freedom to learn depends upon appropriate opportunities and conditions in the classroom. Students should exercise their freedom with responsibility so as not to endanger the rights, goals, and beliefs of other students. Appropriate classroom behavior is implicit in the Cedar Crest Honor Code and is defined and guided by complete protection for the rights of all students and faculty to a courteous, respectful classroom environment.

One very important right you have as students is your right to a classroom that is conducive to learning. People vary with respect to the conditions under which they are able to concentrate and learn; background noises or
activities you find inoffensive may provide a barrier to another student’s ability to follow lectures and/or discussions. Thus, it is part of my responsibility as an instructor, and your responsibility as a student, to help assure that the classroom is as free as possible from unnecessary distractions. Unnecessary distractions include (but are not limited to) disturbances due to cellular phones, pagers, laser pointers, passing notes, and private conversations. **Please turn your cellular phones to vibrate** before entering the classroom. Other distractions include late arrivals, early departures, inappropriate conversations, leaving the classroom during lectures, eating meals, doing work for other classes, dozing, and any other behaviors that might disrupt instruction and/or compromise students' access to their Cedar Crest College education.

Students who disturb the class in any of these ways (or who engage in any behavior that unnecessarily interferes with another student’s learning) will be considered as demonstrating undesirable citizenship, and pursuant to college policy, will be asked to leave class. The student will be considered absent for that class date.

In order to avoid distraction, the last row of seats in the classroom will be reserved for students entering the classroom late.

**Classroom Policy:** As a class, we agree to abide by the following principles. We will:

- occupy equal positions in the classroom, no one at the head of the class
- listen respectfully when another is speaking
- conduct ourselves respectfully with regard both to verbal and nonverbal communication
- feel free to express differing opinions, but will endeavor to be non-judgmental toward each other
- be patient with one another
- give everyone equal speaking time
- hold all personal information strictly confidential
- all be equally responsible for adhering to these principles

**Classroom Expectations:** It is expected that every student will:

- come to class prepared
- be alert and attentive in class
- participate in class discussions
- show an interest in the subject
- ask questions when you don’t understand
- seek outside sources if you need information
- notify the professor of an absence
- adhere to professional behavioral expectations as outlined in the syllabus and student nursing handbook
- follow chain of command for any student issues as outlined in the student nursing handbook. This implies that all problems related to class or clinical issues will be brought to the attention of the course or
clinical instructor before taking the issue to other sources.

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**Transportation**

Individual responsibility for transportation may be necessary to complete nursing course requirements. Transportation to, from, and within clinical agencies is the responsibility of the student.

**Attendance and Exam Policy**

1. It is expected that students will make every effort to attend and participate in class. If you are unable to attend class, please notify the instructor via email. Attendance and participation count for 10% of your total class grade. This grade will be determined by your attendance in class, sharing an article with the class, submitting evidence of completing both online classes, and completion of the ATI practice exam by the date designated on the pacing schedule.

2. Exams may be based on the material in the course syllabus, plus any related material presented in lecture, discussion, required readings, orientation and lab sessions.

3. Exams are expected to be taken as scheduled. They may not be taken PRIOR to the scheduled exam time. Failure to be present for a scheduled exam will result in a grade of zero for that exam. Extenuating circumstances will be evaluated on an individual basis by the professor. If you are ill on the day of an exam, you will need to present a doctor's excuse in order to be able to make up the exam.

4. Specific exam content will be reviewed at the discretion of the professor.

5. All written assignments both clinical and classroom are due on the date assigned. Late class assignments will be subjected to a 10 point deduction each day the assignment is late, this includes weekend days. Clinical reviews that are submitted late will receive a grade of zero. Malfunctioning computers or printers will not be accepted as valid reasons for late submissions. Please see the instructor prior to the assignment due date to request accomodations due to extenuating circumstances.

6. Final exam - A student's obligation for this course includes attendance at the final exam on the day and time scheduled. Students should not make travel arrangements until the final exam schedule is published; if you must make plans early, travel should be scheduled after the last final exam day.
Learning Accommodations

In accordance with the American with Disabilities Act, any student has the right to request reasonable accommodation of a disability. Accommodations can be requested and authorized through the Advising Center on campus. Please note that you will need to present documentation of your disability from a qualified person to the Advising Center. It is important to make this request as soon as possible so that we will have time to make necessary arrangements.

Grading Scale

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<tr>
<th>Grade</th>
<th>Minimum Score</th>
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<tbody>
<tr>
<td>A</td>
<td>93 - 100</td>
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<tr>
<td>A-</td>
<td>90 - 92</td>
</tr>
<tr>
<td>B+</td>
<td>87 - 89</td>
</tr>
<tr>
<td>B</td>
<td>83 - 86</td>
</tr>
<tr>
<td>B-</td>
<td>80 - 82</td>
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<tr>
<td>C+</td>
<td>77 - 79</td>
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<tr>
<td>C</td>
<td>73 - 76</td>
</tr>
<tr>
<td>C-</td>
<td>70 - 72</td>
</tr>
<tr>
<td>D+</td>
<td>67 - 69</td>
</tr>
<tr>
<td>D</td>
<td>60 - 66</td>
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<tr>
<td>F</td>
<td>below 60</td>
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**Passing the course:** A minimum grade of C (73%) is required for passing of this course. Failure in the clinical component of the course will require the student to repeat the entire course. Failure in theory will require the student to repeat the entire course. A student must receive a final course grade of at least 73% or higher and a satisfactory clinical evaluation to pass.

**PLEASE NOTE:** Grades for individual assignments are not rounded, and are scored to the nearest tenth of a point. Final grades will be rounded. (Example: A calculated grade of 72.5% is rounded to a 73%; a grade of 72.4 is rounded to a 72% and is considered a failing grade for this course).

**Appeal of assignment grades:** Students have the right to appeal the grade for a written assignment. The appeal must be made to the lead faculty member, and all requests for appeal must be made in writing, with the reason for appeal clearly noted. The student must then meet with the instructor to discuss the situation. There will be NO exceptions to this policy. Students who have failed the course cannot retroactively appeal individual assignment grades after the final grade for the course has been determined. In that situation, the final grade for the course can be appealed as per college policy.

When appealing a grade on a writing assignment, the paper will be blind-
graded by another faculty member and both grades will be averaged together to determine the final grade for the assignment. PLEASE NOTE: This process MAY result in a grade lower than the original grade (prior to the appeal).

**Course Expectations**

1. It is expected that the required readings will be completed before each class to enhance discussions.

2. Students are responsible for knowing the pathophysiology and nursing care of specific diseases covered in this course.

3. Students are required to keep both an electronic and a written copy of any assignment required for the course. Lost assignments are the responsibility of the student.

4. Please use email as a formal mode of communication (i.e. as a business letter) with appropriate parts, correct spelling, and polite language. Course/clinical changes, additions, updates, etc. will be communicated via email. All students are expected to check their email daily.

5. It is the student's responsibility to seek help from faculty regarding any problems or questions about assignments or coursework. The student is required to review the Nursing Student Handbook for information regarding chain of command for unresolved problems.

**Clinical Expectations**

**Grading:** Clinical performance will be evaluated as satisfactory or unsatisfactory. Your reflective on-line discussion, clinical review entries, instructor assessment, preceptor assessment, and self-assessment will all contribute to the final clinical evaluation process. An unsatisfactory grade in the clinical component of the course will result in a failure for the course.

**Attendance for clinical is mandatory** and necessary to complete the course objectives. You are expected to stay at the clinical site for the entire time scheduled, unless specifically asked to leave by the preceptor. If this occurs, it is expected to be immediately reported to the instructor via telephone call. Failure to notify the instructor of an early departure may result in an unsatisfactory clinical day.

**Lateness:** It is expected that you will arrive at the clinical site at the scheduled time. If you realize that you will be late because of some unavoidable circumstance, you will call the clinical agency ahead and inform the appropriate contact person of the delay and the expected arrival time. You will then call the clinical instructor to inform her of the delay. Failure to notify the instructor and the agency PRIOR to a clinical lateness will affect your ability to meet the course
objectives and will result in clinical failure.

**Illness/Absence:** In the event of an illness, the clinical instructor must be notified by telephone prior to the clinical experience. **It is expected that you will speak to the clinical instructor directly and not just leave a voice mail message.** It is also your responsibility to notify the clinical agency of the absence. Clinical absences, due to illness or other circumstances, which require make-up days outside scheduled clinical time, may be subject to an additional fee as stated in the Nursing Student Handbook. Unexcused absence from a clinical site will affect your ability to meet the course objectives and will result in clinical failure. A physician's note may be required for illness. In this case, the student may not resume clinical experiences unless cleared by his/her physician in writing. The clinical clearance form is available in document sharing in e-College.

**Rescheduling** of the clinical experiences will be at the discretion of the instructor.

**Transportation** is the student's individual responsibility. Carpooling is not an option due to the independent nature of the clinical experiences.

**Supplies:** Students will be given CCC community health carry bags. You are responsible for taking care of and stocking community health bags during assignment to the home health experience. You are responsible for supplying a small container of liquid hand soap, waterless soap, stethoscope, bandage scissors, nursing drug handbook, and a local area road map. Blood pressure cuffs are recommended if owned. Gloves, paper towels, and other protective supplies will be supplied by the NLRC.

**Dress Code:** It is expected that all students adhere to the dress code as stated in the "dress code" section. Any infraction of the dress code may affect your ability to meet the course objectives and may result in clinical failure. Dress code for individual sites are detailed in the clinical site listing.

**Cellular Phones:** Cellular phones are not permitted on any clinical site EXCEPT during home care clinical when the preceptor may need to contact the student during travel time. Cell phones should be kept in the vibrate mode during this clinical experience.

**Behavior:** You are expected to demonstrate professional behavior throughout the clinical rotation. This applies to ALL clinical experiences. Professionalism is demonstrated, in part,
by:

- Contacting the instructor to make any needed schedule changes. Scheduling is not the responsibility of the preceptor.
-Following appropriate lines of communication.
- Displaying a calm, even temperament under stressful conditions
- Maintaining self-control in all clinical situations
- Interacting effectively with peers, coworkers, and superiors
- Promoting relationships of trust and respect
- Dressing in an appropriate, professional manner

**Smoking:**
Students may not smoke during clinical hours. Additionally, students are prohibited from smoking while wearing the clinical uniform prior to clinical, i.e., while commuting to the facility. The odor of smoke can be offensive to patients, especially those who are ill. Just as fragrant substances such as perfume are prohibited during a clinical experience, the odor of smoke is also prohibited. Students who smell of smoke will be given one warning. If the student is on the clinical unit smelling of smoke a second time, the student will be asked to leave and will be required to make-up the day at the student’s expense.

**e-College threaded discussion:** Due to the fact that community health clinical experiences are individual and varied, it is difficult to schedule post conference meetings. In an effort to facilitate sharing of experiences, concerns, and accomplishments, you are expected to contribute to the post clinical discussion thread. The Post Clinical thread is located under the Clinical heading on the home page. Comments will not be judged, analyzed, criticized or evaluated. The extent of your participation in this exercise however will be reflected in your clinical evaluation and participation grade.

**Clinical Guidelines:** Please refer to the unit marked "clinical" for further information related to the clinical component of this course.

**ATI RN Content Mastery and Review Program**

Students are required to participate in the Assessment Technologies Institute's (ATI) Content Mastery and Review Program. This program aids in the review and remediation process for the state licensing exam in nursing. Each module combines thorough content mastery assessment with review questions based on case studies.

In this course, the student will focus on the Community nursing content area. The student will receive a review module and DVD as a resource and will be required to take non-proctored/proctored assessments. The 2.0 non-
**proctored** assessment must be completed by **August 3**. This assessment may be taken as many times as possible to prepare for the proctored assessment.

The **proctored** assessment (60 questions) will be give on **August 4**. This 60-item test offers an assessment of the student's basic comprehension and mastery of community health principles.

Assessed concepts include:

1. Foundations for community-oriented health (e.g., transcultural nursing, health promotion guidelines, levels of disease prevention, epidemiological perspective, health initiatives, community health practice and health belief models, and public health policy);
2. Roles and settings for community health nursing;
3. Health care delivery to communities (e.g., community assessment and diagnosis, community health program planning, referrals and community agencies, and health care financing);
4. Nursing care of aggregates in the community (e.g., health promotion and disease prevention for specific age groups, and nursing care of families); and
5. Special community needs (e.g., communicability prevention, disaster management, violence, homelessness, and substance abuse).

Students must meet the criterion for Proficiency Level 2 (see ATI Testing Policy) to successfully complete the module.

**ATI Testing Policy**

1. A **non-proctored** computerized assessment will be made available to students in the beginning of the semester for computerized test-taking practice. Students are encouraged to take this assessment as many times as they would like. An ATI study book and DVD will be provided.

2. Students will take a **proctored** computerized assessment on **August 4**. This assessment will occur prior to the final course examination. There will be no change of testing dates. The score for a missed assessment will be a 0% on the Individual score and the student will be required to remediate as outlined below in Step #4. If there are extenuating circumstances, these must be brought to the attention of the professor prior to the assessment date.

3. It is expected that students will demonstrate a mastery of concepts **at Proficiency Level 2**. A **Proficiency Level 2** standard is considered to exceed minimum expectations for performance in this content area.

4. Those students who **do not** demonstrate a mastery of concepts **at Proficiency Level 2 must** take a 2nd non-proctored test until a **Proficiency Level 3** is accomplished. This assessment can be taken as many times as needed to achieve the Proficiency Level 3.

5. For those students who take the 2nd non-proctored test, a paper copy
of accomplishing **Proficiency Level 3** on the 2\textsuperscript{nd} non-proctored test needs to be presented to the professor for admission to the final exam for that course.

6. Failure to present proof of remediation in the 2\textsuperscript{nd} non-proctored exam before the final course exam will result in a zero for the final exam.

*Please refer to the ATI Community Syllabus in Doc Sharing for the ATI Progression Algorithm.*