

ELC Student Handbook 2016-2017



**Tanner Health System
School of Nursing**



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**UNIVERSITY OF WEST GEORGIA
TANNER HEALTH SYSTEM
SCHOOL OF NURSING**

Experiential Learning Center Student Handbook

Introduction

The University of West Georgia Tanner Health System School of Nursing Experiential Learning Center (ELC) is a state of the art facility that provides an opportunity to practice nursing and critical thinking skills, apply nursing knowledge, and develop caring attitudes in a safe and supportive learning environment. The nursing experience within the facility is oftentimes referred to as on-campus clinical. Nursing students in all semesters of the UWG THSSON undergraduate program will work in the ELC. The learning experiences in the ELC support the achievement of the BSN program goals.

The faculty and staff of the ELC embrace the core values of UWG: caring, achievement, inclusiveness, innovation, integrity, sustainability, and wisdom. The ELC is guided by the quality caring philosophy of the THSSON. The mission and vision of the ELC are in direct alignment of the mission and vision of the THSSON.

ELC Mission

The mission of the ELC is to exemplify academic excellence by providing authentic educational experiences to develop safe, knowledgeable, and skilled healthcare professionals ready to assist in addressing current and evolving health care needs across the lifespan for the global community.

Vision

The vision of the ELC is to be a highly-regarded state of the art simulation facility, leading in the scholarship of teaching and learning in the simulated clinical and practice laboratory environments.

THS SON Philosophy

Statement of Philosophy and Assumptions:

The faculty of the Tanner Health System School of Nursing believe and support the mission, purpose, and goals of the University of West Georgia. While offering both undergraduate and graduate academic programs, the School of Nursing frames its philosophy within the theoretical structure of caring as the essence of nursing. The faculty are committed to creating a milieu for learning that fosters quality caring and believe that all persons are inherently worthy and deserve respect, justice, and equality regardless of gender, race, culture, sexual orientation, or socio-economic status. In pursuit of these beliefs, the faculty declare the following statements of our beliefs and assumptions:

Persons

Persons, including individuals, families, groups, communities, and populations are unique and dynamic as thinking, caring, feeling contributors to society with the right to make choices and assume responsibility for their choices. Persons are holistic, representing an integration of mind, body, and spirit. They have spiritual social-cultural-ethical beliefs and values that influence the perception of self, others, and the world.

Environment

People construct meaning and develop knowledge through being in the world and interacting with the world. Environment includes persons, cultures, the health-care system and other aspects of the constructed and natural world. A concern for the environment is essential due to the social, political and economic influences on health and the health-care system.

Health

Health is a dynamic and contextual state of being in which there is a balance of relationships, choices, and human potentials. The person's perception of health is unique and self-determined within psychological, biophysical, socio-cultural, developmental and spiritual dimensions.

Nursing

Nursing is a distinct discipline focused on promoting optimal health through the formation of caring relationships across the lifespan while recognizing and respecting the uniqueness of recipients of care. Quality caring provides the foundation for nurses to deliver safe and person-centered care in a rapidly changing health care environment (Duffy, 2009).

Teaching-Learning

Teaching- learning is a dynamic, reciprocal, lifelong process that nurtures and facilitates growth in all participants. Learning occurs through meaningful relationships characterized by connectedness, openness, and creativity. Teachers and learners share the responsibility for creating and maintaining an environment that nurtures these relationships (Duffy, 2009).

Nursing Education

The undergraduate program prepares graduates for professional nursing practice, future leadership roles, and advanced education.

References

Duffy, J. (2010). Quality in caring in nursing: Applying theory to clinical practice, education, and leadership. New York: Springer Publishing Company. University of West Georgia School of Nursing. (2010). 2009-2010 faculty handbook. Carrollton, Ga: Author.

BSN Program Objectives

The purpose of the Bachelor of Science (BSN) program is to prepare individuals for basic registered nurse practice roles in diverse health care settings. Graduates of the program will be able to:

1. Provide holistic nursing care to persons (individuals, families, groups, communities, and populations) across the continuum of healthcare in a variety of settings at local and global levels, focusing on health promotion and disease and injury prevention across the lifespan.
2. Practice quality caring as the essence of nursing for persons of diverse cultures, values, beliefs, and lifestyles.
3. Utilize critical thinking and clinical reasoning based on theoretical, empirical, and experiential knowledge from the liberal arts and sciences to provide safe, competent, evidence-based care.

4. Communicate and collaborate effectively within inter-professional teams utilizing technology and information systems to improve health outcomes and healthcare systems.
5. Participate in analysis, critique, and reform of healthcare regulatory, policy, and financial systems that influence nursing and healthcare environments.
6. Apply leadership and management principles to empower nurses and achieve high standards of quality and safety in the delivery of person-centered care.
7. Assume altruistic legal and ethical responsibility and accountability for personal and professional behavior.
8. Utilize effective teaching strategies to empower persons to achieve healthcare goals.

General Information

The ELC consists of lab spaces on the Carrollton and Newnan campuses. Each campus has two sections, one for skills practice, equipped with task trainers and low fidelity manikins, and the other for application of knowledge and practice of clinical judgment with high fidelity human patient simulators (HPS). Both areas are realistic healthcare environments with authentic healthcare equipment including medication dispense systems and a patient electronic healthcare record. Each area is monitored with audio/visual equipment. The skills lab has many manikins that are controlled by the learner with a SimPad. Virtual IV simulation is available to practice venipuncture. The simulation lab is reserved for simulated learning experiences with clinical faculty and staff which includes briefing, patient report, a healthcare scenario with learning objectives, feedback, debriefing, patient documentation, video viewing, and reflection.

Simulation

In nursing education, simulation provides an opportunity for the learner to demonstrate skills and practice clinical reasoning and judgment in a realistic, clinical environment. The simulated learning experience provides a safe environment, free from harm to patients, and free from judgment and criticism of student nurse. Scenarios are provided to the learner which include learning objectives, a patient with history and background information, and a situation or “scenario” including medical information. A scenario typically lasts from 10-20 minutes. The simulated patient can be a manikin, doll, HPS, or live actor, and the patient is to be treated as if they were a real live person. The experience is enriched by the ability of the learner to suspend disbelief that the simulation is not “real.” Other participants that may be included in the scenario are family members, other healthcare professionals, or clergy. Prior to participating independently in the scenario, the learner will be provided information in which to prepare, called a briefing session. Afterwards, the session is debriefed with an instructor by reflecting and discussing chosen actions. It is during this time that you will receive feedback. This is an intense session where much learning will occur, and the priority is to remain positive and engaged.

The student nurse will participate in different types of simulations which include learning, practice, and graded. Learning simulations generally include an instructor at the bedside for guidance. Practice simulations are opportunities for students to practice skills and concepts learned, either alone or with classmates, as if practicing as a licensed nurse. Graded simulations are opportunities for the clinical or course instructor to objectively evaluate your progress and competencies. All are meaningful learning experiences in which students will gain much insight about themselves personally and professionally.

Guidelines/Agreements/Consents

ELC Etiquette and Safety Guidelines

1. Bring a positive and engaged attitude that is conducive to learning.
2. Always demonstrate caring and respectful behavior to all participants including classmates, instructors, lab assistants, and staff.
3. Arrive prepared to practice with your knowledge, resources, and nursing equipment (stethoscope, penlight, watch, calculator, medication resource/drug reference, and checklists).
4. All ELC doors are to remain closed and locked at all times. Use ID/swipe card for access.
5. Maximum capacity is 49. At no time shall there be more than 49 people in either the skills or simulation areas.
6. Adhere to dress code according to the UWG THSSON BSN Handbook. Students are required to wear Cherokee Unisex Workwear Scrubs in royal blue, item numbers CK4100 and CK4876; or Cherokee Unisex Workwear Core Stretch Scrubs in royal blue, item numbers CK4043 and CK4725 while utilizing the ELC.
7. Learning activities are to remain confidential and only to be discussed between instructor and student within the confines of the ELC.
8. No food or beverage allowed except for capped water.
9. Electronic devices and Wi-Fi to be used for classroom/learning purposes only.
10. Report equipment malfunction or disrepair to the ELC manager or instructor.
11. Supplies and equipment may not be removed from the ELC.
12. Leave the ELC in as good or better condition than when you arrived. Beds are to be left in low position with neat and tidy linens. Manikins and SimPad are to be powered off. Curtains to be pushed against opposite wall of light switch. Put equipment and supplies away. Laptops to be returned to laptop cart and connected to power supply.
13. Take care to not stain or damage the manikins with rough handling, pens, markers, and betadine. Students will be held responsible for damage to equipment in the ELC.
14. Use 22G IV or smaller for IV starts on task trainers, simulator, or manikins.
15. Treat the manikins and simulators as you would treat real patients.
16. Lockers and cubbies are to be used at your own risk. The University of West Georgia and the Tanner Health System School of Nursing are not responsible for lost, stolen or damaged contents placed in the assigned lockers, unsecured lockers, or cubbies. Please refer to the UWG THSSON Locker Policy found in the BSN handbook.
17. Lab practice outside of regularly scheduled class time is by appointment only with ELC manager or instructor. Sign in/out on log book for open lab practice.
18. Participants will sign a ***Confidentiality/Academic/Dishonesty/Honor Code*** Agreement.
19. Participants will sign a ***Consent for Video Recording and Publishing*** Agreement.
20. Standard precautions should be used at all times including, but not limited to, hand hygiene and gloves. Used sharps should be placed in sharps container. Notify instructor or ELC manager of full sharps container or empty soap/hand sanitizer dispensers.
21. Students are prohibited from practicing invasive techniques on themselves and others.
22. All users who suffer from latex allergies or sensitivities should take precautions as some of the equipment and supplies contain latex. Please notify the ELC manager or instructor if you have a known sensitivity or allergy.

23. Utilize proper body mechanics when moving manikins or heavy equipment. Ask for assistance as needed. Wheelchairs, carts, stretchers, and other transport equipment is available for use.
24. In the event of injury, acute illness, and/or clean needle stick, notify instructor immediately. If involved in simulation, please excuse yourself.
25. Any health incident, defined as any actual or potential injury or health risk, that occurs to a participant in the ELC must be documented on the "UWG 1st Report of Injury" form [http://www.westga.edu/assetsBF/cpf/Documents/FROI.Jun13_\(1\).pdf](http://www.westga.edu/assetsBF/cpf/Documents/FROI.Jun13_(1).pdf)
26. Please refer to "Recommendations for Evaluation and Treatment Following Clinical Exposure to Blood or Body Fluids" in the UWG THSSON BSN Handbook for exposure, or potential exposure, to blood or body fluids.
27. Fire Extinguishers are in the hall of the ELC and Automatic External Defibrillators (AED) are found near the elevators.
28. In case of severe weather, follow the UWG Severe Weather Policy <http://www.westga.edu/police/42.php>
29. Watch how-to video for use of Pyxis medication administration system <https://www.youtube.com/watch?v=7k6-47MjWoU>
30. Watch how-to video for use of SimPad <https://youtu.be/JAZyE0pu3l4>

I have read, understand, and will abide to aforementioned ***ELC Etiquette and Safety Guidelines***.

Name _____ Date _____

Instructor _____ Course _____

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1/21/2016

ELC Documentation Guidelines

All nursing care provided in the ELC should be documented in the Evolve SimChart Electronic Health Record (EHR) <https://evolve.elsevier.com/>. Any questions regarding access to SimChart are to be directed to the ELC Manager. For help using SimChart, please go to Student Resources [SimChart Student Resources](#).

The SimChart can be a great place to start when preparing for simulation. Learning objectives, patient diagnosis, medications, labs, and provider's orders are common items available on the simulated patient's EHR. In "pre-simulation" the student can use "pre sim manager" to help aid in preparation for the simulation experience. The "care plan" section can help guide the student nurse from the medical diagnosis to nursing diagnosis to expected outcomes and potential nursing interventions.

The Golden Rule to documentation is "*if it's not documented, it didn't happen.*" Document all care provided to your simulated patient in the EHR in SimChart. And conversely, do not document anything that you have not done. You may document an intervention that was provided by someone else, but be specific who provided the care. It is very important to document thoroughly, accurately, and in a timely manner.

Document observations, daily measurements, safety issues, interventions, medication administration, interdisciplinary communication, client statements, and unusual events.

Narrative notes are a sub category of documentation and are used to convey material that may not fit into structured fields, as summaries of an event or shift, or change in care. It would not be common practice to write a narrative assessment for a head to toe assessment. The narrative note should reflect the nursing process including assessment, intervention, and evaluation. An acceptable method of narrative charting is SOAPIE

<http://www.snjourney.com/ClinicalInfo/WrAndReport/SOAPIE.htm>

At the very least, the narrative note should include subjective and objective data, the nursing intervention, and the patient response or the next plan of action.

Guidelines for narrative documentation:

1. Begin each narrative entry with date, time, and end with your signature.
2. End each narrative note with your first initial, last name, and "SN."
3. It is *not* necessary to state the patient's diagnosis and previously documented information; for example, "21 year old patient admitted for dehydration."
4. Avoid describing the checklist for the procedure provided like "donned my gloves." It is assumed that you followed standards of care when providing interventions.
5. Be clear and concise. Concise means brief, and to the point, succinct and very few words.
6. It is *unnecessary* to document obvious information like "I entered the patient's room." If there are assessment findings documented like breath sounds and respiratory rate, it is obvious that you were with the patient.
7. Avoid generalizations and vague phrases, especially those that reflect uncertainty like "appears" and "apparently." Stick to the facts (assessment findings) and be specific.
8. Use objective data, anything that you can measure, see, hear, smell, and feel.

9. Document subjective findings carefully and accurately, oftentimes within quotations for example; “patient states ‘I feel bad.’”
10. Do not make value judgments or state opinions like “patient is drunk.” Use objective evidence like a blood alcohol level or “patient smells like alcohol and has an unsteady gait.”
11. Document as if the patient is reading over your shoulder.
12. Demonstrate competency and attention to detail by using correct spelling and accepted medical terminology.
13. Use only approved abbreviations Joint Commission [Official Do Not Use List](#).

ELC Medication Calculation Guidelines Approved February 8, 2016

1. Round medication calculation answers to the tenth place. (Five or above in the hundredths place goes to next number. Four or less is dropped.)

- Examples: $1.07 = 1.1$; $0.97 = 1$

2. There are four exceptions to the above rule.

- **Round decimals to the hundredth place if the amount is less than one ml.** (Five or above in the thousandths place goes to next number. Four or less is dropped.)
Examples: $0.683 = 0.68$; $0.937 = 0.94$
- **For drops, round to a whole number.**
Example: $6.7 = 7$ gtts
- **For intravenous fluids round to a whole number as a standard IV pump delivers volume in whole numbers.**
Examples: $75.5 = 76$ ml/hr; $75.4 = 75$ ml/hr
- **High-alert, high-risk medications such as insulin, heparin, antineoplastic, and vasoactive medications (e.g. digoxin 0.125 mg, or dopamine 5 mcg/kg/min) require an exact amount as prescribed and any rounding should be in accordance with institutional policies or as directed in the test item.**

3. For medication calculation problems with more than one-step, do not round until the final answer has been obtained. Exception: Body Surface Area calculations are rounded to the hundredth place before use as meters squared (m^2) in the calculation of individualized dosages.

4. Use the conversion factors as listed in the current required pharmacology course textbook.

5. Avoid trailing zeros (such as 1.020 ml).

6. Add leading zeros when less than one ml (0.25 ml).

Institute for Safe Medication Practices. (2016). Retrieved from <http://www.ismp.org/default.asp>

Kees, Joyce L., Hayes, Linda E., and Hayes, Evelyn R. (2014). *Pharmacology: A patient-centered nursing process approach* (8th Ed.). St. Louis, MS: Elsevier Saunders.

ELC Confidentiality/Honor Code/Academic Dishonesty Contract

All work and practice in the ELC is to remain strictly confidential and not shared among classmates and other students. Failure to abide to this agreement is a direct violation of the UWG THSSON Honor Code and Academic Dishonesty declarations (see below).

The student will not share the specifics of any learning activities or testing in the ELC, especially those related to scenarios and/or simulations and debriefing. The student will not talk about any ELC experiences outside of formal debriefing. To maintain the integrity of the learning experience, the student understands that the content of simulations and scenarios and debriefings is to remain confidential, whether witnessed in real time or from media. The student will abide by the UWG THSSON Honor Code and Academic Dishonesty policies while respecting the roles of instructors, peers, volunteers, and staff.

I have read all of the above, understand, and agree to the terms under Confidentiality/Honor Code/Academic Dishonesty Contract

Name _____ Date _____

Instructor _____ Course _____

2015-16 UWG THS SON BSN Student Handbook 36**Honor Code**

As a student of the University of West Georgia in the Tanner Health System School of Nursing, I am a person of integrity, veracity, and honesty. I will uphold the moral and ethical principles of the University of West Georgia's Tanner Health System School of Nursing, habitually engage in truthful speech, statements and actions, and be honorable in intentions and actions. I am a person of respect. I respect human dignity, worth, and the uniqueness of every individual. I will respect persons of all backgrounds without prejudice. I will strive to promote, advocate for, and protect the health, safety, and rights of those under my care. I am accountable for my own judgment and action, and responsible for my role as a student of the University of West Georgia's Tanner Health System School of Nursing. I lead by example and I will never settle for achieving merely what is expected, but will strive for a standard of excellence that reflects dedication to the profession of nursing.

2015-16 UWG THS SON BSN Student Handbook 36**Academic Dishonesty**

Students are admitted to the University of West Georgia and the BSN Program with the expectation of acceptable personal standards of conduct and ethics. The Tanner Health System School of Nursing expects students to behave in a manner congruent with the NSNA Code of Academic and Clinical Conduct and the Code of Professional Conduct (available online at www.nsna.org/pubs; Click on Chapter Resources). Academic dishonesty is defined in the UWG Connections book as follows: 1. No student shall give or receive, or otherwise furnish or procure, assistance not authorized in the preparation of an essay, report, examination, or other assignment in an academic course or in the fulfillment of program or degree requirements such as standardized examinations. 2. No student shall take, attempt to take, steal, or otherwise obtain, gain access to, or alter in an unauthorized manner any material pertaining to the conduct of a

class or to the completion of any program or degree requirement, including but not limited to tests/examinations, laboratory equipment, roll books, academic records, or electronically stored data. 3. Plagiarism is prohibited. Themes, essays, term papers, tests and other similar requirements must be the work of the student submitting them. Direct quotations must be indicated and ideas of another must be appropriately acknowledged. Academic dishonesty will not be tolerated in the Tanner Health System School of Nursing. Faculty will take appropriate corrective measures to deal with those situations in which these standards have been breached. Students guilty of academic dishonesty may receive failing grades for assignments and/or courses and may be dismissed from the program and/or the University. See course syllabi for specific policies. Procedures for appeals in cases of academic dishonesty can be found in the UWG Connections book. Reports of violations of the UWG Honor Code will be reported to the Vice President for Academic Affairs (VPAA) office, regardless of THS SON sanctions imposed.

ELC Consent to Audiovisual Record

There is video equipment throughout all areas of the ELC. Audiovisual recordings may be used to ensure safety and confidentiality; and for purposes of debriefing, instructional review, educational purposes, and research.

I authorize UWG THSSON staff and instructors to audiovisual record myself within the ELC.

I have read all of the above, understand, and agree to the terms under consent to audiovisual record.

Name_____Date_____

Instructor_____Course_____