COURSE NUMBER AND TITLE: N-3300 Mental Behavioral Health Nursing

COURSE DESCRIPTION/COURSE OVERVIEW:
This course focuses on the care of patients across the lifespan experiencing cognitive, mental and behavioral disorders. Emphasis is placed on management of patients facing emotional and psychological stressors as well as promoting and maintaining the mental health of individuals and families. Concepts of crisis intervention, therapeutic communication, anger management, and coping skills are integrated throughout the course. Community-based care and support services are addressed. Clinical experiences provide the student an opportunity to apply theoretical concepts and implement safe patient care to patients in selected mental health settings.

COURSE PRE-REQUISITES: N-3401 Health Assessment, N-3604 Fundamentals of Nursing Practice and N-3205, Nursing Informatics and Technology with a minimum grade of "C"; may be taken concurrently with N3709 and N3314**.**

CREDIT ALLOCATION: Three semester credit hours (2-1-0)
. **in RM TBA**

FACULTY INFORMATION: **OFFICE**   **PHONE**   **E-MAIL**
                                                    emariscal@utep.edu **(preferred method of communication)**
                                                    Remind APP: Monday-Friday 9:00a-5p.

OFFICE HOURS:
Virtual Office Hours: Monday 3:00 PM-5:00 PM, or by appointment.

REQUIRED TEXTBOOKS:
Townsend, M.C. (2018). *Psychiatric Mental Health Nursing: Concepts of care in Evidence-Based Practice: 9*th Ed. Philadelphia: F.A. Davis Company. ISBN: 13:978-0-8036-6054-0

Townsend, M.C. (2015). *Psychiatric Nursing: Assessment, Care Plans, and Medications: 9*th Ed. Philadelphia: F.A. Davis Company. ISBN: 978-0-8036-4237-9

Pedersen, D.D., (2014) *Psych Notes: Clinical Pocket Guide*. 4th Ed. Philadelphia: F.A. Davis Company.
        ISBN: 978-0-8036-3922-5

COURSE OBJECTIVES:
CO1. Perform a mental behavioral health assessment on patients with common mental health disorders.
CO2. Develop an individualized, evidence-based plan of care that demonstrates an appreciation of a patient's diverse background and includes recommendations for the adoption of health-promoting behaviors.
CO3. Collaborate with members of the interprofessional health care team while acting as a patient advocate in the provision of safe, quality care for patients with common mental health disorders.
CO4. Demonstrate clinical decision making when participating in the provision of care to patients with common mental health disorders.
CO5. Apply knowledge of pharmacology, psychopathology, nutrition, and established evidence-based practices in the provision of care for patients with common mental health disorders.

CO6. Use verbal and nonverbal communication that promotes caring, therapeutic relationships with patients and their families, as well as professional relationships with members of the healthcare team.
CO7. Use health information systems and patient care technologies in an effective and secure manner when assessing and monitoring patients with common mental health disorders.
CO8. Provide health and safety related education using a variety of teaching methods based on the identified needs of patients and their families.
CO9. Use organizational, time management, priority-setting, and decision-making skills in the provision of care to patients with common mental health disorders.
CO10. Implement strategies that provide a safe environment for patients, self, and other while supporting quality improvement initiatives.
CO11. Adhere to ethical, legal and professional standards in the provision of care for patients with common mental health disorders.

CLINICAL OBJECTIVES:
Use the nursing process as a framework for providing nursing care
1A. Perform a general mental health assessment of patients.
1B. Develop of a plan of care based on data collected during a general assessment.
1C. Select cultural and age-appropriate interventions for inclusion in the plan of care.
1D. Implement nursing care that is safe and based on the established plan of care.
1E. Use clinical decision making when providing patient care and participating in the evaluation of patient outcomes.
Promote continuity of health care within the health care team and across various settings
2A. Participate as a member of the health care team.
2B. Communicate patient-related information to designated members of the health care team in a timely manner.
2C. Plan and provide health-related education.
2D. Use information technology to document patient information and communicate with members of the health care team.
Use scientific principles and evidence-based practice as a foundation for nursing practice
3A. Apply knowledge of pathophysiology, pharmacology and nutrition when providing patient care.
3B. Identify best practice resources used as a basis for nursing care and clinical decision making.
3C. Use identified resources in the provision of evidence-based practice.
Provide high-quality nursing care in an environment that is safe for the patient, self, and others
4A. Implement actions that promote safe practice and a safe environment for patients, self, and others.
4B. Advocate for the patient when nursing care issues arise.
4C. Identify patient care concerns related to the quality of care.
4D. Participate in quality improvement activities that address patient care concerns.
4E. Use organizational and priority setting skills in the provision of patient care.
Practice nursing in a professional, ethical, and legal manner
5A. Practice nursing in accordance with established standards of practice and institutional policies and procedures.
5B. Use the ANA code of ethics as a framework for ethical practice.
5C. Practice nursing in accordance with the Nurse Practice Act and other regulatory guidelines.
5D. Maintain professional accountability and responsibility when communicating with patients and in the delivery of patient care.
Use communication that promotes an effective exchange of information.

6A. Use verbal and nonverbal communication that promotes caring, therapeutic relationships with patients.
6B. Identify barriers to effective communication and make appropriate changes in communication.
6C. Communicate effectively with the health care team and report issues that indicate conflict is impacting patient care.

<p align="center">Topics and Objectives:</p>

Mental Health and Mental Health Issues:
1. Compare and contrast criteria for mental health and mental illness.
2. Describe factors that affect an individual's mental health.
3. Identify attributes or signs of mental health issues.
4. Discuss how age, ethnicity, gender, education, culture, and belief system can affect developing, experiencing, and recovering from psychiatric disorders.
5. Identify settings in which mental health treatment if offered.
6. Discuss each category of the Diagnostic and Statistical Manual of Mental Disorders multiaxial system.
7. Compare and contrast a DSM-V diagnosis with a nursing diagnosis.
8. Identify how cultural influences could affect making an accurate DSM-V diagnosis

Historical and Theoretical Concepts:
1. Discuss history of psychiatric care.
2. Describe psychological adaptation responses to stress.

Personality Development:
1. Discuss the relationship between personality development and mental/behavioral disorders.
2. Describe the main theories of personality development.
Content Topics:
a. Psychoanalytic theory—Freud
b. Human motivation—Maslow
c. Interpersonal theory—Sullivan
d. Psychosocial development--Erikson

Relationship Development:
1. Describe relevance of a therapeutic nurse-patient relationship.
2. Discuss the importance of self-awareness in the nurse-client relationship.
3. Describe the phases of relationship development and the tasks associated with each phase.

Therapeutic Communication and Application in the Mental Health Setting:
1. Describe the nature and goals of the therapeutic nurse-patient relationship.
2. Identify three factors that can interfere with accurate communication between nurse and patient.
3. Demonstrate four techniques that can enhance communication, and discuss what makes them effective during the communication process.
4. Discuss differences between verbal and non-verbal communication.
5. Discuss the effect on the communication process when there is a lack of understanding of cultural differences.
6. Discuss how confrontation, immediacy, nurse self-disclosure, and role playing can be used by the nurse in a therapeutic relationship.
7. Identify when there is a need for boundaries set between nurse and patient.
8. Describe the importance of self-awareness in the nurse-patient relationship.

Milieu Therapy:
1. Define milieu therapy.
2. Explain the goal of therapeutic community/milieu therapy.
3. Discuss conditions that characterize a therapeutic community.

Role of the nurse/nursing process and standards of practice for mental health nursing:
1. Discuss the role and responsibilities of mental health/psychiatric nurses
2. Identify major trends in mental health nursing.
3. Describe the standards of practice of psychiatric and mental health nursing according to the American Nurses Association Statement on the Scope and Standards of Psychiatric Mental Health Nursing Practice.

Ethical and Legal Issues in Psych/Mental Health:
1. Differentiate among ethics, morals, values and rights.
2. Define ethical dilemma.
3. Discuss legal issues that may arise during mental health treatment such as, the patient's right to receive treatment, the patient's right to refuse treatment, the patient's right to informed consent.

Concepts of Psychobiology & Psychopharmacology:
1. Discuss how psychotropic drugs are used in mental health care.
2. Describe how functions of the brain are altered by psychotropic drugs.
3. Describe various complementary and/or alternative therapies such as - massage, herbal medications, aromatherapy, acupuncture, acupressure, homeopathy, and chiropractic medicine.
4. Identify major categories of psychotropic drugs and discuss the use, action, potential adverse and side effects, and nursing implications of the following:
Content Topics:
a. Antipsychotics (conventional, atypical)
b. Antidepressants (tricyclics, selective serotonin reuptake inhibitors (SSRIs) serotonin/norepinephrine reuptake inhibitors (S/NRIs), monoamine oxidase inhibitors (MAOIs), atypical antidepressants)
c. Bipolar (mood-stabilizers, antipsychotics)
d. Sedative/hypnotics (benzodiazepines, benzodiazepine-like drugs, melatonin agonists, barbiturates)
e. Anxiolytics (benzodiazepines)
f. Attention-deficit/hyperactivity disorder drugs (CNS stimulants and non-stimulant options)

Cultural and Spiritual Concepts:
1. Apply the nursing process in the care of individuals from various cultural groups.
2. Identify clients' spiritual and religious needs.
3. Apply the nursing process to individuals with spiritual and religious needs.

Neurocognitive Disorders:
1. Discuss the demographics of the older population and the impact on mental health care.
2. Identify components of an assessment of the healthy geriatric patient and the patient with cognitive impairment.
3. Discuss predisposing factors implicated in the etiology of NCDs.
4. Discuss identified behaviors, goals, and nursing interventions associated with mental health problems in the older adult including
5. Describe potential barriers to mental health care for the older adult.
6. Define and differentiate among various neurocognitive disorders (NCDs).

Depressive Disorders:
1. Describe biologic and psychosocial theories about the etiology of mood disorders.
2. Differentiate between normal grief reactions and pathological grief behaviors.
3. Describe the emotional, cognitive, behavioral, and physical symptoms associated with depression.
4. Describe three phases of treatment for mood disorders.
5. Identify outcomes, goals and planning for each phase of treatment for mood disorders.
6. Describe risk factors and clues that might signal suicidal thoughts.
7. Develop nursing interventions and communication strategies for patients with depression, mania, and suicide ideation.
8. Compare advantages, actions, side effects and nursing implications for mood stabilizing medications and antidepressants.
9. Identify the main characteristics of the depressive disorders.

Bipolar and Related Disorders:
1. Describe bipolar disorder.
2. Identify predisposing factors in development of bipolar disorder.
3. Identify symptomatology associated with bipolar disorder and use this information in client assessment.
4. Discuss the various pharmacologic treatments for bipolar disorder.
5. Apply the nursing process to clients diagnosed with bipolar disorder.

Suicide Prevention:
1. Discuss epidemiological statistics and risk factors related to suicide.
2. Describe predisposing factors implicated in the etiology of suicide.
3. Differentiate between facts and myths regarding suicide.
4. Apply the nursing process to individuals exhibiting suicidal behavior.

Electroconvulsive Therapy:
1. Define electroconvulsive therapy.
2. Discuss historical perspectives related to electroconvulsive therapy.
3. Discuss indications, contraindications, mechanism of action and side effects of ECT.
4. Describe the role of the nurse in administration of ECT.

Anxiety Disorders:
1. Identify predisposing factors of anxiety disorders.
2. Describe outcome criteria for each of the identified anxiety disorders.
3. Discuss the action, side effects, potential adverse reactions, and nursing implications for benzodiazepine medications.
4. Discuss coping strategies in the management of stress.
5. Describe clinical manifestations, goals, nursing interventions, and treatment of patients with:

Substance Related & Addictive Disorders:
1. Define addiction, intoxication and withdrawal.
2. Discuss predisposing factors in etiology of addictive disorders.
3. Identify symptomology and assess clients with addictive disorders.
4. Identify nursing diagnoses common to clients with additive disorders and select appropriate nursing interventions for each.
5. Describe treatment modalities relevant to treatment of individuals with addictive disorders.

Psychotic Disorders:
1. Define schizophrenia.
2. Describe the progression of symptoms from prodromal to the acute phase of schizophrenia.
3. Describe various types of schizophrenia and other psychotic disorders.
4. Differentiate among the three phases of schizophrenia regarding symptoms, focus of care, and needs for intervention.
5. Discuss non-pharmacological treatment modalities for patients with schizophrenia that may be beneficial.
6. Describe effective strategies of individual, group, and family therapies that may helpful for patients with schizophrenia and their families.
7. Describe three common problems associated with severe mental illness.
8. Discuss behavioral and psychological manifestations of severe mental illness in relation to the person's ability to function, their families, and others.
9. Identify evidence-based practices for the care of the severely mentally ill.
10. Discuss the importance of medication and the need for the severely mentally ill to adhere to the regimen
11.Discuss properties of the traditional and atypical antipsychotic drugs such as: ex: olanzapine, risperidone

Trauma & Stressor-Related Disorders:
1. Discuss historical aspects and epidemiological statistics related to trauma and stressor related disorders.
2. Describe various types of trauma and stressor related disorders and symptomatology associated with each.
3. Describe appropriate nursing interventions for behaviors associated with trauma and stressor related disorders.
4. Discuss various modalities relevant to treatment of trauma and stressor related disorders.

Survivors of Abuse and Neglect:
1. Describe epidemiological statistics associated with intimate partner violence.
2. Discuss characteristics of victims and victimizers.
3. Identify predisposing factors to abusive behaviors.
4. Describe physical and psychological effects on the survivors of intimate partner violence, child abuse and sexual assault.
5. Apply the nursing process to survivors of intimate partner violence, child abuse and sexual assault.

Anger and Aggression Management
1. Define and differentiate between anger and aggression.
2. Identify when the expression of anger becomes a problem.
3. Discuss predisposing factors to the maladaptive expression of anger.
4. Apply the nursing process to clients expressing anger or aggression.

Therapeutic Groups:
1. Identify basic principles of group work
2. Describe the phases of group development.
3. Describe roles group members may adopt.
4. Discuss therapeutic factors that operate in all groups
5. Identify facilitating techniques used by the group leader.
6. Compare the characteristics of a healthy family functioning with a dysfunctional family functioning.
7. Identify several strategies for family intervention.
8. Describe the role of the nurse in family therapy.

Somatic Symptoms & Dissociative Disorders:

1. Describe various types of somatic symptom and dissociative disorders and identify symptomology association with each.
2. Identify predisposing factors in the development of somatic symptom and dissociative disorders.
3. Describe appropriate nursing interventions for behavioral associated with somatic symptom and dissociative disorders.
4. Discuss modalities relevant to treatment of somatic symptom and dissociative disorders.

Eating Disorders:
1. Identify and differentiate among several eating disorders.
2. Describe symptomology associated with anorexia nervosa and bulimia nervosa.
3. Identify predisposing factors in the development of eating disorders.
4. Describe appropriate interventions for behaviors associated with eating disorders.
5. Discuss various modalities relevant to treatment of eating disorders.

Personality Disorders:
1. Compare and contrast the main characteristics of the three clusters of personality disorders
2. Describe current treatment modalities for patients with personality disorders.
3. Describe the limitations in the use of medications to relieve symptoms associated with personality disorders.
4. Develop nursing interventions and communication strategies for patients with personality disorders.
5. Discuss the importance of setting and keeping clear boundaries when working with persons with personality disorders.
Content Topics:
Cluster A/ paranoid, schizoid, and schizotypal personality disorders
Cluster B/ antisocial, borderline, and narcissistic personality disorders
Cluster C/ dependent, obsessive-compulsive, avoidant personality disorders

Child & Adolescent Psychiatry Objectives:
1. Discuss factors that contribute to child and adolescent psychiatric disorders.
2. Describe treatment modalities for selected disorders of childhood and adolescence
3. Describe the nurse's role in administering medications used to treat psychiatric disorders in children and adolescence.
4. Describe clinical manifestations and intervention strategies for pediatric mental illnesses.

The Bereaved Individual:
1. Discuss types of loss that trigger the grief response in individuals.
2. Differentiate between normal and maladaptive responses to loss.
3. Apply the nursing process to individuals with grief.

Community Mental Health Objectives:
1. Distinguish between goals and interventions of mental health care in the hospital and the community.
2. Describe the role of the nurse as a member of the interdisciplinary team in caring for chronically ill and/or homeless mentally ill in the community.
3. Discuss the continuum of psychiatric care from the acute care setting to the community setting.
4. Identify community resources for the chronically and/or homeless mentally ill.

UTEP SON PLOs (Level 2 Program Outcomes) & QSEN Competencies: Patient centered care, Team work and collaboration, Evidenced based practice, quality improvement, safety, informatics, professionalism, leadership, communication, system-based practice, health promotion and education.
BSN Essentials (AACN):   BSN1, BSN2, BSN3, BSN4, BSN5, BSN6, BSN7, BSN8, BSN9
*Differentiated Essential Competencies (DECs) for Baccalaureate Degree (BSN) *version year 2010*
  Member of the Profession A, B, C, D
  Provider of Patient-Centered Care A, B, C, D, E, F, G, H
  Patient Safety Advocate A, B, C, D, E, F
  Member of the Health Care Team A, B, C, D, E, F, G

Classroom Teaching Methodologies: Lecture, Group discussion, Role play, Case presentations
Clinical Teaching Methodologies: Role Play, Pre and Post Conferences, Clinical Practice, Clinical Assignments

GRADING POLICY AND STRUCTURE
A. **6th semester nurse must pass both theory and clinical to pass the course**. *Achieving less than 75% in the didactic portion of the course or failing to pass clinical results in course failure.* There is no <u>ROUNDING UP</u> of grades and fractional points will be dropped. Extra credit is not permitted.

B. All written assignments must be submitted and must meet passing criteria (75%). Written Assignment grades will be factored into the overall course grade only if the student has achieved a minimum of 75% in the didactic portion of the course. **In order to pass the course, the student MUST:**
  1. **Pass the Didactic Assignments with a minimum of 75%.**
  2. **Pass the Clinical Experience with a minimum of 75%.**

<u>Assignments</u> ***total 100 points***

12.5 %	Test 1
12.5 %	Test 2
10 %	Mental Health ATI
10 %	Psychopharmacology Exam
25 %	Final Exam
10 %	Quizzes 1-5, highest grade scored on ATI Practice A or B
20 %	Clinical Assignments
Complete/Not Complete	My Learning Reflection (N3300)

C. Clinical performance is evaluated on a ***Pass/Fail basis*******

  Pass = 1) Successful demonstration of competency in course designated simulated scenarios **AND**
    2) Demonstrating competency in *every* area of clinical performance in direct patient care **AND**
    3) Successful completion of all required clinical paperwork
  Fail = 1) Non-achievement of competency in course designated simulated scenarios **<u>OR</u>**

2)   Non-achievement of competency expectations in any one
or more areas of clinical performance.

3)   Any serious infraction involving professionalism and/or safety
related issues for assigned patients.

** ATI: Pass at/or > Level 2 less than level 2 will require remediation in order to be considered for progression from course. ATI level attainment is also counted as didactic grade.

Grading Breakdown: Exams* / Quizzes: 80%   Assignments: 20%   ***Clinical practice: P/F

Test I   12.5%
Test II   12.5%   **Grading scale:** 90-100 = A
Test III-ATI   10%
Psychopharm 10%
Final Exam   25%   **80%**   80 – 89 = B
Quizzes   10%   75 – 79 = C
Clinical Practice-----------------P/F   60 – 74 = D
Clinical Assignments   **20%**   < 60   = F
                            100%

*In addition to course exams, 6th semester nurses are required to take and pass (at a Level 2) the Psychiatric Nursing ATI exam. Scoring < Level 2 will require documented remediation.

** The proctored computerized ATI RN Mental Health Exam will count as 10% total of the didactic course grade and be awarded points as outlined in the table (A) below:

Below Level 1	Level 1	Level 2	Level 3
64 Points	70 Points	88 Points	100 Points

- Students that fail to achieve Level 2 are required to complete remediation activities prior to moving on to the 7th semester courses, no additional points will be given for remediation and or second attempts at a proctored exam.

D. ATI Remediation:
- Students who do not pass RN Mental Health Exam ATI at a (level 2) or higher will be required to remediate and to submit documentation of this remediation and/or in accordance with Course Manager's protocol. Students will receive an incomplete (I) in the respective course until the required remediation is accomplished and documentation is submitted (see Table B).

Benchmark	Focused Review
Below Level 1	At least 4 hours of focused review
Level 1	At least 3 hours of focused review

- Submission of remediation documentation must be done in accordance with course manager's protocol and direction. Failure to submit in a timely and evidence of completed requirements as guidelines above will prevent student from progressing.
- The table above is intended as a guideline and "minimum" requirements for remediation. Documentation transcript must indicate that you reviewed modules and all assigned content for a minimum of (4) or (3) hours depending on your Level (<1 or 1) attainment. All practice and final assessments must be completed at a minimum 75% passing rate in order to be accepted.

****Clinical Practice/Performance: P/F**
   a) **Competency (meeting all criteria at SATISFACTORY level) as described on Clinical Evaluation form. The following skills are taught in this course:**
   b)

1.	Psychiatric Nursing Assessment
2.	Suicide assessment
3.	Developmental Assessment
4.	Mini-Mental Health Assessment
5.	Medications Assessment
6.	AIMS, CAGE, SMAST
7.	Daily report to Instructor
8.	Progress note
9.	Brief plan of care
10.	Utilizing the DSM-5 APA reference

COURSE POLICIES:
   1) **MyLearning Reflection:** A guided course reflection is required in this course. This reflection assignment will be a mandatory assignment in all Traditional Pre-Licensure and RN-BSN courses. The assignment will be due at the end of the course. Students who do not submit a completed document will receive an Incomplete in the course and not be allowed to progress until the assignment is completed.

   2) **Academic Regulations:** Review in UT El Paso Undergraduate Student Catalog and the **School of Nursing Student Handbook** the following policies: ***Religious Observance, Clinical Compliance, Ethical and Responsible Use of Social Media, Policy on Academic Integrity, Professional Attire and Uniform Guidance, Progression Policy, and Effective Nursing Practice Policy, Statement on Disability, and Student Injury.***

   3) **ATI:**   It is a course requirement for all students to take the nationally standardized exam provided by Assessment Technologies Incorporated (ATI). Students not achieving a passing standard will be required to remediate and to submit documentation of this remediation in accordance with Course Manager's protocol. Students will receive an 'Incomplete' in the course until/unless this remediation is accomplished. See the School of Nursing Student Handbook for the ATI Policy and Procedures.

   4) **Attendance:** Students are expected to attend all classes and to arrive on time *to in person lecture or virtual lecture*. Late comers are asked to enter quietly and unobtrusively. Students are responsible for content and/or announcements presented in class or clinical sessions whether present or not.

   5) **Blackboard:** 6th semester nurses are required to **subscribe to and access the course Blackboard site**. Blackboard is the main source of communication between faculty and 6th semester nurse. 6th semester nurses are encouraged to access this site on a daily basis. The course syllabus, calendar, topical outline of scheduled lectures, assigned readings, and clinical

assignment criteria are also posted on this site. Grades will be made available ONLY through this site.

6) **Communication:** is the responsibility of both 6th semester nurse and faculty. The faculty will keep 6th semester nurses informed of progress in both theory and clinical. 6th semester nurses with questions or concerns should:

> *- First go to the appropriate faculty member.*
> *- If not resolved, then follow the appropriate chain of command in the sequence as identified below:*
> 1. *Course manager*
> 2. *Director of Undergraduate Education*
> 3. *Assistant Dean for Undergraduate Education*
> 4. *School of Nursing Dean*

7) **Grievances:** Challenges to grades may be pursued only on the basis of malice, bias, arbitrary or capricious grade determination or impermissible discrimination. In no event shall a challenge be pursued only on the basis of the standards employed in setting grades, so long as those standards are employed impartially. Grievances MUST be in WRITING and filed through the faculty member, the SON Assistant Dean for Undergraduate Education and the Dean of the SON. If the student is not satisfied with the outcome after using the chain of command, the student may consult with and/or file a challenge with the Chairperson of the University Student Welfare and Grievance Committee.

8) **Policy on Scholastic Dishonesty:**
Students are expected to be above reproach in all scholastic activities. Students who engage in scholastic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and dismissal from the School of Nursing and/or university. Scholastic dishonesty includes but is not limited to reproducing test or quiz materials from memory, copy/paste or Xerox, cheating, plagiarism, collusion, the submission for credit or any work or materials that are attributable in whole or in part to another person, taking an examination for another person, and any act designed to give unfair advantage to a student or the attempt to commit such acts. Regents' Rules and Regulations, Part One, Chapter VI, Section 3, Subsection 3.2, Subdivision 3.22. Since scholastic dishonesty harms the individual, all students, and the integrity of the School of Nursing and the university, policies on scholastic dishonesty will be strictly enforced. See detailed procedure in the Handbook of Operating Procedures (HOP) available in the Office of the Dean of Students.

9) **Policy relating to Disability / Pregnancy/ CASS**:
   - **Disability**: Nursing is a physically and mentally challenging profession. Nurses are required to think critically and quickly in order to respond to patient care needs. Nurses are also expected to be able to assist patients in transfer, ambulation and in activities of daily living. In order to do this, nurses must be able to lift, bend and be on their feet for extended periods of time. Nursing students are expected to be able to perform these functions. It is therefore the responsibility of the student to inform the course manager of any limitations they may have in completing course expectations. Nursing students with limitations in any of the above abilities are advised to discuss these matters with The Center for Accommodations and Support Services (CASS) to determine if reasonable

accommodations could be provided. Written guidelines r/t accommodations from CASS must be submitted to the course manager PRIOR to the start of the course. If you have a disability and need classroom accommodations, please contact CASS at 747-5148, or by email to cass@utep.edu, or visit their office located in UTEP Union East, Room 106. For additional information, please visit the CASS website at www.sa.utep.edu/cass. *CASS' Staff are the only individuals who can validate and if need be, authorize accommodations for students with disabilities.*

- **Pregnancy**: It is the responsibility of the student to inform the instructor of pregnancy limitations. Written guidelines r/t accommodations from The Center for Accommodations and Support Services (CASS) must be submitted to the course manager PRIOR to the start of the course.

10) Professional Behavior:

- Students are expected to behave professionally *at all times* with faculty, peers, preceptors, and clients **and** in any setting in which the student is a representative of UTEP. Bullying, verbal abuse, insubordination, or personal attacks will not be tolerated in any form. Any behavior deemed inappropriate by faculty and/or preceptors will result in faculty conference(s), and completion of a Student Opting for Success (SOS) plan that addresses the student's areas of needed improvement. Possible activities available to assist the student in attaining the SOS objectives include stress and/or anger management counseling sessions. Inappropriate behaviors may result in removal from the clinical setting and/or an administrative withdrawal from the course and/or dismissal from the program.
- The following addresses expectation of infection control, safety, and hygiene applying to classroom and clinical practice settings. Students are expected to be mindful of personal hygiene and cleanliness of clothing and personal baggage. Aseptic techniques should be used when coughing, sneezing, and disposing of personal tissues. Students and faculty must be careful to create an image of cleanliness and health, avoiding personal body odors and excessive use of perfumed chemicals. Hair should be clean and neatly kept, skin should be clean and intact. Open wounds with drainage/swelling/ or lacerations should be cleansed/bandaged for the classroom setting; however, a physician note is needed to be allowed into the skills practice lab or into a clinical rotation in the nursing program.

11) **Retention: Students Opting for Success (SOS):** When a student is not progressing in the course as expected, or is not successful on an examination, or is not meeting clinical expectations, they will be required to meet with the instructor to discuss strategies for success as outline on the SOS form. The SOS plan will identify recommendations for improving the student's success potential and will specify time lines for completion of these recommendations. The SOS form (with all recommendations completed and all signatures in place) must be submitted to the course manager by due date. *Students who are not successful in the course should be aware that non-compliance with SOS recommendations jeopardizes eligibility for the opportunity to repeat the course in the subsequent semester.* See respective Blackboard home page for SOS form.

12) **UTEP Tobacco Policy:** The University of Texas at El Paso (UTEP) appreciates your cooperation as we are a smoke and tobacco-free campus. The policy is part of the university's promotion of respect toward our environment and community. The use of tobacco products

(including but not limited to cigarettes, cigars, pipes, water pipes, electronic cigarettes, smokeless tobacco, snuff, chewing tobacco or all other tobacco products) is prohibited in university buildings, grounds, sidewalks, walkways, and university-owned property and applies to all students, faculty, staff, contractors, and visitors. For more information, visit: www.tobaccofree.utep.edu.

DIDACTIC POLICIES

- **Lecture: DO NOT** enter classroom until door is opened allowing entry. Enter quietly and quickly find seating (no assigned seats).
  o Recording during lecture is **NOT** authorized. (**PRACTICE LISTENING SKILLS**)
  o Active participation during class is expected, be prepared to be called on for discussion by reading the assigned chapters and coming to class with questions you may have of the chapter.

- **Examination and Quiz policies**:
  o Quizzes are administered as per course calendar. There will be no make-up if you miss a quiz.
  o During an examination it is ideal if no back-packs/purses and or resources are brought to the classroom. In the event that this cannot be avoided the student will be asked to place all items at the front of the class along the wall until completing exam and submitting it. Please turn cell phones completely off.
  o Once you exit the exam you cannot re-enter the room.
  o Any forms, requests and or signatures should be requested before lecture and each exam.
  o **Please review your grade; you have until the next quiz/exam to contest your grade**.
  o Students must use Respondus Lockdown for all quizzes and exams that are taken on Blackboard.
- **Psychopharmacology Exam:** 6th semester nurses are expected to take a 25 question, 30- minute exam on psychotropic medications. The psychopharmacology exam is NOT similar to pharmacology exams taken in previous semesters. Dose calculations, strengths and dose adjustments are not expectations for the passing of the exam. Application and nursing judgment for the use of the medications including adverse side effects, efficacy, and the disorders each psychotropic is used for is crucial. A study guide and list of "need to know medications" will be provided at the beginning of the course on BB in order to facilitate comprehension.
- **Electronic devices:** All cell phones, tablets, or other electronic devices that are not in use for the quiz or exam must be turned off during testing or quizzes as many of these devices connect automatically to Wi-Fi and the buzzing sound associated with putting the device in vibrate mode is a distraction to many. Please be considerate to your fellow students.
  o **The use of a cell phone as a mobile hot spot is prohibited unless expressly approved by the course manager**
  o All cell phones **MUST** be placed on the table or in your backpack in the front during testing and quizzes
  o Laptops or tablets with electronic book are allowed only in the classroom setting and are strictly prohibited in clinical setting.

- Professional behavior in the classroom is expected. A referral to the Assistant Dean for Student affairs will be given after a behavior issues has been addressed once with the 6th semester nurse. Returning to class is based on the decision of the referral.

CLINICAL POLICIES- for N-3300 Mental Behavioral Health Nursing

- **Clinical Clearance**: Before clinical orientation, 6th semester nurses are required to have clinical clearances that are valid through the end of the semester. Health clearances should be verified through the Student Health Services. CPR, insurance, background checks, drug screening and city-wide orientation clearances should be verified by the CHS Compliance Office. 6th semester nurses will not be eligible for clinical participation until all clearances are verified.

- **HIPAA:** HIPAA (Health Insurance Portability and Accountability Act of 1996) is a mandatory federal law that protects patient health information. In keeping with HIPAA guidelines, nursing 6th semester nurses **shall not**, under any circumstance; photocopy, fax, or remove from the agency premises, any component of the patient's medical record. Failure to comply with HIPAA policies **will** result in disciplinary action that may include course failure and/or dismissal from the nursing program. In addition, legal action may be taken against the student.

Attendance: Attendance:
- **In the event clinical site is not available, students will participate in remote learning activities.**
- **Punctual attendance for all clinical activities is required and tardiness and/or absenteeism will not be tolerated.** The days and times for clinical experiences are clearly posted on the class/clinical schedule and students are expected to be where assigned and to be on time.
- If a student anticipates absence or tardiness for any clinical experience, the clinical instructor or Course Manager must be notified prior to the absence or tardiness and this will only be tolerated for a single occurrence. Makeup for one incidence of tardiness and/or clinical absence will be at the faculty's discretion if there are extenuating circumstances. In case of illness, a release from a health care provider will be required to return to clinical with documentation that is signed and on an official letterhead.
- Students who are tardy and/or absent from any clinical experience will receive a formal verbal and written counseling relating to this lack of professionalism. A second occurrence of tardiness and/or absence from clinical activities will result in failure of clinical, and thus, failure of the course.
- Required clinical experiences include hospital orientation, clinical orientation, computer orientation as required by the agency, lab demonstrations, practice sessions, simulation hospital days, pre/post conferences and direct patient care.

    o You are expected to wear your clinical uniform during the clinical orientation. (Navy UTEP scrubs, white undershirt, UTEP SON picture name badge, socks and shoes- please review clinical dress code)
- **Failure to meet the safe nursing practice policy measures is cause for clinical failure in the course.**

- **Disability**: Nursing is a physically and mentally challenging profession. Nurses are required to think critically and quickly in order to respond to patient care needs. Providing direct patient care in the clinical rotation can also be physically demanding and may involve assisting patients in transfer, ambulation and activities of daily living. 6th semester nurse with disabilities may contact the UTEP Office of Disabled Student Services (DSSO) to request reasonable accommodations under the Americans with Disabilities Act guidelines at www.utep.edu/dsso. They can also be reached by calling (915) 747-5148, or by email at dss@utep.edu.
- **Statement on Pregnancy**: It is the responsibility of the 6th semester nurse to inform the instructor of a pregnancy. Written guidelines (i.e., lifting limitations) from the health care provider must also be submitted to appropriate clinical faculty.
- **Clinical Clearance**: Before clinical orientation, students are required to have clinical clearances that are valid through the end of the semester. Health clearances should be verified through the Student Health Services. CPR, insurance, background checks, drug screening and city-wide orientation clearances should be verified by the Compliance Office. Students will not be eligible for clinical participation until all clearances are verified.
- **Clinical Preparation / Professionalism**: Any student who is not adequately prepared for clinical will not be allowed to care for patients if doing so would violate the departmental safe nursing practice policy (see SON Handbook for the Safe and Effective Nursing Practice Policy). Daily preparation is a major component on the clinical evaluation. The dress code for clinical in N-3300 is clean and pressed clothes:
  1. Navy UTEP Scrubs with plain white undershirt or tank
  2. Approved SON Badge with photo
  3. Socks and shoes (need to be closed toe, **professional**, comfortable shoes, to walk and participate in activities- No high heels, boots, strapless shoes, flip-flops, etc.)
  4. A watch, pen (black ink), a complete clinical log (blank),
  5. Arrival at the hospital is at 6:45 am to be in report by 6:55 am. Afternoon clinical arrival is at 2:45 pm to be on at report by 2:55 p.m. You will be considered late if you are not at report by 6:55 am for morning clinical or 2:55 pm for evening clinical. (see attendance)
- **Unprepared for clinical-**
  You will be considered unprepared for clinical, sent home and miss a clinical day for the following reasons among others:
  - Incomplete uniform/no badge
  - Dirty, unkempt uniform, or no uniform
  - Blank clinical packet
- **HIPAA:** HIPAA (Health Insurance Portability and Accountability Act of 1996) is a mandatory federal law that protects patient health information. In keeping with HIPAA guidelines, nursing students **shall not**, under any circumstance; photocopy, fax, or remove from the agency premises, any component of the patient's medical record. Failure to comply with HIPAA policies **will** result in disciplinary action that may include course failure and/or dismissal from the nursing program. In addition, legal action may be taken against the student.

University of Texas at El Paso
Students Opting for Success (SOS) form

Name: _____ **ID:** _____ **Date:** _____

Course: _____ **Faculty:** _____

Remediation/Counseling initiated by: _____ for ___didactic ___lab ___clinical

Faculty description of identified need:
Student description of identified need:

Student Profile:
   A. **Schedule an appointment with** _____ **on or before**
      _____   **Course Manager/Instructor**
      Date

   B. **Prior to the appointment with the Course Manager/Instructor, please respond to the following questions:**

   1. **Are you currently employed? [ ] Yes [ ] No   If so, how many hours per week?**
      _____

   2. **Are you currently in a study group? [ ] Yes [ ] No   If so, how many hours per week?____**

   3. **How many hours per week do you study by yourself?** _____

   4. **Describe how you prepared for** _____ **(area of difficulty):**

   5. **What adjustments do you think you need in order to be successful in this course?**

Didactic remediation activities:

REQ	REC	Activity	Due Date
		Attend _____ Academic Coaching sessions for course_____	
		Attend exam reviews	
		Attend study sessions/Join a study group	
		Complete _____ online/ATI tutorials	
		Complete Academic Coaching Videos/Tutorials	
		Attend test taking strategies at UTEP Testing Center	
		Referral to the Center for Academic Support Services	
		Referral to the UTEP Student Counseling Center	
		Attend all lectures	
		Referral to the Student Success Coordinator	
		Other:	

Simulation/Skills Remediation Activities:

REQ	REC	Activity	Due Date
		Complete _____ hours of open lab to remediate on _____ skills	
		Attend Academic Coaching for dosage calculation remediation	
		Complete ATI tutorials on Critical Thinking strategies	
		Complete ATI tutorials on Prioritization	
		Complete ATI tutorials on communication	
		Other:	

Clinical Site Remediation/Counseling Activities:

REQ	Sent Home	Clinical Failure	Activity	Date of Occurrence
			Counseled on Tardiness: Student was _____(min/hrs) late to clinical _____(date)	
			Counseled on Absenteeism. Required to attend open lab, make up clinical, or clinical failure.	
			Counseled for lack of clinical preparation. Student to come to Clinical with all assigned paperwork, effective _____	
			Counseled for unsafe clinical practice (specify):	
			Counseled for noncompliance with dress code (specify): Student to uphold dress code.	
			Counseled for violating client confidentiality (HIPAA) (specify).	
			Counseled for not communicating honestly with faculty/staff (specify).	
			Counseled for not following faculty instructions (specify):	
			Other:	

Faculty Comments	Student Comments

Signature/Date:

_____

Signature/Date:

_____

Revised: 3/29/2020
AMF

SAFE AND EFFECTIVE NURSING PRACTICE POLICY
FOR THE UNDERGRADUATE NURSING PROGRAM

The following Safe Nursing Practice Policy is a revision of a similar policy that has been in effect since the nursing program was a part of the University of Texas System (1972).
This policy must be adhered to in order for a student to succeed in clinical nursing courses. The nursing process must be directed toward quality care for the patient/client/family/community/population to promote health, prevent illness, advocate, and treat human responses.

Safe and Effective Nursing Practice is defined as the ability to:
- Demonstrate knowledge about patient/client health status
- Observe, report and record signs and symptoms
- Accurately interpret, report and record changes in patient's condition
- Demonstrate actions that assure the delivery of quality nursing care
- Set priorities and carry through with appropriate nursing interventions
- Evaluate and make substantive judgments relative to the quality of nursing care
- Calculate and administer drugs safely, including documentation of administration

As professional nurses with a commitment to the welfare of clients/patients, the nursing faculty reserves the right to refuse the opportunity to a student to care for patients if the student's health interferes with performance or if the student gives evidence of unsafe and/or ineffective nursing practice. A student may not render care when under the influence of prescribed or over-the-counter medication which may affect judgment, or if the student imbibes in/or is under the influence of alcohol or illicit drugs. A student who is deemed to demonstrate unsafe practice will fail the course and be dropped from all clinical courses enrolled in at that time. Further progression in the nursing major will be evaluated.

Since the faculty student ratio in the clinical area is 1:10, it is impossible for a faculty member to be present continually with each student to observe every situation. It is therefore imperative that each student assumes personal responsibility to be prepared for each clinical practice experience. Each student is expected to check immediately with the instructor or agency staff if in doubt about patient care or a patient's condition, and to report to the instructor or staff when leaving the clinical area to assure continuity of care for patients. Students who come unprepared for clinical may be dismissed from the clinical site upon the discretion of the clinical faculty.

Adopted by Faculty Organization Committee Meeting.
Revised February 13, 1985, December 14, 1994 and September 2012.

SCHOOL of NURSING INCIDENT REPORT

Student Name:_____**UTEP ID #:**_____

Home Address:_____**Phone:**_____

Time Accident Occurred:_____a.m./_____p.m.   Date: _____

Place of Accident:_____ Number of People Involved: _____

PART OF BODY INJURED   **DESCRIPTION OF THE ACCIDENT**

How did the accident happen? / What was student doing?

Abdomen	_____	Foot	_____
Ankle	_____	Hand	_____
Arm	_____	Head	_____
Back	_____	Knee	_____
Chest	_____	Leg	_____
Ear	_____	Mouth	_____
Elbow	_____	Nose	_____
Eye	_____	Scalp	_____
Face	_____	Tooth	_____
Finger	_____	Wrist	_____

Other (specify)_____

_____
_____
_____
_____
_____
_____
_____
_____
_____

NATURE OF INJURY

Abrasion	_____	Laceration	_____
Bite	_____	Needle Stick	_____
Bruise	_____	Poisoning	_____
Concussion	_____	Puncture	_____
Cut	_____	Scratches	_____
Dislocation	_____	Shock (el.)	_____
Fracture	_____	Sprain	_____

(specify)_____

_____

Student's signature

DEGREE OF INJURY

Non-disability	_____	
Temporary Disability	_____	
Permanent Impairment	_____	Other
Death	_____	

Faculty/Preceptor in charge when accident occurred
NAME(S)]_____ Present at scene of accident: YES____NO____

IMMEDIATE ACTION TAKEN

First-Aid Treatment   _____By: _____
Campus Police Notified (747-5611)   _____By: _____
EMS notified (911)   _____By: _____
Sent to STUDENT HEALTH CTR.   _____By: _____
Sent Home   _____By: _____
Sent to Physician   _____By: _____
PHYSICIAN'S NAME:_____ PHONE: _____
Sent to Hospital   _____ By: _____
HOSPITAL NAME:_____ PHONE: _____
Was a Parent or other individual notified? YES____ NO_____ When_____ How_____
Name of Individual(s) Notified:
_____By whom? _____

WITNESSES:
1. NAME:_____ADDRESS/PHONE:_____
2. NAME:_____ADDRESS/PHONE:_____

REMARKS
What recommendations do you have for preventing accidents of this type? _____
_____
_____

_____   _____   _____
Student Signature   **Faculty Signature**   **Dean / Asst. Dean / Assoc. Dean**

Revised: 3/29/2020
AMF