NRS 453 Section 2L- Community Health Nursing Lab

Welcome to NRS 453! My name is Jenna Levy and I will be your clinical professor for this course. Providing competent equitable healthcare to diverse populations, communities, and aggregate groups is essential to reducing health disparities across the lifespan. In this course you will learn the role that nurses play in various community settings.

Instructor: Jenna Levy , MSN, RN

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Office locations and hours: by appointment

Instructor Communication Policy: As your clinical instructor, I am here to help you be successful in this course. Please feel free to reach out to me anytime during the clinical day via email, text, or phone. In your communications, include your name, phone number, and best time to reach you. Outside of clinical hours, I will respond within 24 hours Monday-Friday. I may not be available to respond on a weekend, but please leave a message and I will respond on Monday. A zoom meeting is also an option, please reach out to schedule 2 days in advance. For general questions, please post your questions/concerns to the "Ask the Professor" Discussion Board, so that questions & answers may benefit the whole class.

NRS 453 Course Description: This course is intended to introduce students to nursing care of individuals, families, communities, and populations across the lifespan and from diverse backgrounds on the principles and practices of community health. Emphasis is placed on assessing factors that influence the health of populations, identifying vulnerable populations, identifying community preferences and the implementation of evidence-based practices in the delivery of care. Emphasis is on spiritually and culturally appropriate health promotion and disease prevention interventions with the application of Neuman Systems Model. The role of the nurse as advocate for social justice is explored.

Number of Units: 3
Prerequisites: ANTH 443 and BIOL 432 or approval from faculty
Co-requisites: NRS 452 Community Health Nursing
Class Day- Wednesday (some students may have Tuesday or Thursday assignments depending on placement)
Time: 0800-1700 (may vary depending on your placement)
Room: N/A- varies

BSN Essentials

The following represent the core content for all baccalaureate nursing programs and provides "the curricular elements and framework for building the baccalaureate nursing curriculum for the 21st century" (AACN, 2008, p.3). The reference and the link for these essentials are provided for you at the end of this section. These essentials "delineate the outcomes expected of baccalaureate nursing programs" (AACN, 2011, p.3), and you should see evidence of these essentials in each of the courses in the BSN curriculum. Below are brief descriptions of each essential and can be found on pages 3 and 4 of the Essentials document. In the document, you will find a deeper discussion of each of them, as well as expected student outcomes and sample content.

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
- A solid base in liberal education provides the cornerstone for the practice and education of nurses.

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

Essential III: Scholarship for Evidence Based Practice
- Professional nursing practice is grounded in the translation of current evidence into practice.

Essential IV: Information Management and Application of Patient Care Technology
- Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

Essential V: Healthcare Policy, Finance, and Regulatory Environments
- Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
- Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

Essential VII: Clinical Prevention and Population Health
- Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.

Essential VIII: Professionalism and Professional Values
- Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to nursing.

Essential IX: Baccalaureate Generalist Nursing Practice

The baccalaureate-graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments.

The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

American Association of Colleges of Nursing (AACN) (2008). [The Essentials of Baccalaureate Education for Professional Nursing Practice](#)

Quality and Safety Education in Nursing (QSEN) Competencies
The overall goal for the Quality and Safety Education for Nurses (QSEN) project is to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work (http://qsen.org/competencies/pre-licensure-ksas/).

1. **Patient-Centered Care**
   Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.
2. **Teamwork and Collaboration**
   Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
3. **Evidence-Based Practice (EBP)**
   Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
4. **Quality Improvement (QI)**
   Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
5. **Safety**
   Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
6. **Informatics**
   Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

BSN Program Student Learning Outcomes:
1. Complete a liberal education that creates a critical thinker who demonstrates intellectual curiosity, rational inquiry and the ability to problem solve.
2. Demonstrate knowledge, skills and attitudes in leadership, quality improvement, and patient safety in order to provide high quality healthcare.
3. Integrate evidence of current best practice in the professional nurse as provider of care, teacher, patient advocate, designer/coordinator of care and member of the profession in a variety of settings.

4. Demonstrate knowledge, skills and attitudes regarding information technology, information systems and communication devices that support safe nursing practice.
5. Identify and participate in change techniques in healthcare policy, finance and regulatory environments, including local, state national and global healthcare trends.
6. Apply effective inter-professional communication and collaboration with health professionals to provide high quality and safe patient-centered care.
7. Identify and evaluate population health issues by focusing on health promotion, disease and injury prevention across and throughout the life span including assisting individuals, families, groups, communities and populations.
8. Practice core values within an ethical and legal framework for the nursing profession.
9. Plan and provide culturally competent nursing care to patients at various levels including individual, families, groups, communities and populations across the life span and the continuum of healthcare environments and populations.
10. Demonstrate effective communication skills conveying accurate information in oral, written and presentation formats.

Course Learning Outcomes:
By the successful completion of this course, you will be able to:

Course Learning Objectives (LO): Students will be able to

1. Use the nursing process as a framework for providing nursing care/ Perform a comprehensive assessment of a community.
2. Use the nursing process as a framework for providing nursing care/ Select and implement cultural and age-appropriate interventions for the target group, community, or population.
3. Promote continuity of health care within the health care team and across various settings/participate as a member of the community based interprofessional health care team.
4. Promote continuity of health care within the health care team and across various settings/plan and provide health-related education to groups, communities, and populations.
5. Use scientific principles and evidence-based practice as a foundation for nursing practice
6. Provide high-quality nursing care in an environment that is safe for the patient, self, and others/ Identify actual and potential environmental safety risks while providing a safe environment for the patient, self, and others.
7. Provide high-quality nursing care in an environment that is safe for the patient, self, and others/ use leadership skills to enhance efficient delivery of care to groups, communities, and populations.
8. Practice nursing in a professional, ethical, and legal manner/ practice nursing in accordance with professional standards.
9. Practice nursing in a professional, ethical, and legal manner/ accept accountability and responsibility for care provided to groups, communities, and populations.

10. Use communication that promotes an effective exchange of information/accept responsibility for effective exchange of information with groups, communities, and populations.

The table below demonstrates how the course assignments align with outcomes and essentials. The criteria for the program learning outcomes, BSN Outcome Criteria and AACN BSN Essentials can be found at the end of the syllabus.

BSN Program Learning Outcome	Course Learning Outcome	AACN BSN Essentials	QSEN	Course Assignments
1, 3, 6, 7, 8, 10	2, 3, 4, 5, 6, 7, 8, 9, 10	II, III, V, VI, VII, VIII, IX	all	Weekly journal
All	All	II, III, V, VI, VII, VIII, IX	all	Community assessment project
10	8, 10	II, III, VI, VI, VII, VIII	2, 6	Community presentation
6, 8, 10	8, 9, 10	II, VI, VIII	all	Community project peer evaluation and self-reflection

Teaching Learning Methods
• Reading assigned text and posted material
• Clinical practice and clinical performance/demonstration of knowledge, skill, & attitude
• Clinical critical thinking/reflection (via journaling)
• Clinical conferences
• Clinical care plans, virtual experiences, and dissemination of project.

Course Structure/Campus Requirements:

Community-based clinical course with asynchronous online component.

Required Materials:
• Access to Canvas (check at a minimum twice/week)
• Internet Access (use of browsers, searches, uploading and downloading files)
• CSUCI Dolphin Email Account
Important: The CI Canvas is linked to the official CSUCI Dolphin Email Account for each student. This is the only email address that will be used to notify students of any announcements or changes related to this course.

Recommended Materials:
Reference Point Software or American Psychological Association (2020) Publication Manual of the American Psychological Association (7th ed.).

How to Access our Course and Get Started:
- Log into myCI: http://myci.csuci.edu
- Click on CI Learn
- Under "My Courses," locate our course and click on it.
- This will take you to the course home page. View the announcement on the homepage and proceed to the "Start Here" area.

Technology Requirements and Support:
1. A computer with a webcam and access to the internet and a quiet place to record. A USB microphone like this one is strongly encouraged.
2. Google Chrome (web browser).
3. You may use a web-based tool called VoiceThread in this class. For an orientation to VoiceThread and support tutorials, please click here.

What I Expect of You:
1. Come prepared to clinical in the appropriate professional attire for the clinical setting assigned.
2. Actively participate in class Canvas and post-conference discussions.
3. Be on time to class.
4. Do not text or work on other classes during your clinical day
5. Come ready to learn with your objectives for each clinical day.

If You Have Technical Problems:
Follow these steps:
1. Clear your browser's cache
2. Try a different browser (Chrome, Firefox, Safari)
3. Shutdown and restart your computer
4. If your problems persist, contact the University Help desk helpdesk@csuci.edu or 805-437-8552

University Mission, Policies & Resources

University Mission Statement:
Placing students at the center of the educational experience, California State University Channel Islands provides undergraduate and graduate education that facilitates learning within and across disciplines through integrative approaches, emphasizes experiential and service learning, and graduate students with multicultural and international perspectives.

Access to CI Learn/Canvas & Dolphin Email Account:
The guidelines for Responsible Use of Information Technology Resources are available in the CSU Channel Islands Catalog for spring 2022-2023 at http://catalog.csuci.edu/. Access to CI

Learn/Canvas support is at http://www.csuci.edu/tc/help/. The IT Help Desk can be reached at 805-437-8552 to assist with any issues.

All announcements will be conducted via CI Learn/Canvas and email using the student Dolphin email account. You must check your course in CI Learn/Canvas at least twice per week. It is highly recommended that you check your CSU Channel Islands' email at least weekly.

Students are required to adhere to all University Policies:

COVID Policy: CSUCI is following guidelines and public orders from the California Department of Public Health and Ventura County Public Health for the COVID-19 pandemic as it pertains to CSUCI students, employees, and visitors on the campus. Students are expected to adhere to all health and safety requirements as noted on the University Spring 2022 website or they may be subject to removal from the classroom.

The student is responsible in following current policies, procedures, and information, which can be found in the current CSU Channel Islands University Catalog http://catalog.csuci.edu/. The following policies should be reviewed:
1. Disability Accommodations: If you are a student with a disability requesting reasonable accommodations in this course, please visit Disability Accommodations and Support Services (DASS) located on the second floor of Arroyo Hall or call 805-437-3331. All requests for reasonable accommodations require registration with DASS in advance of need. You can apply for DASS services here. Faculty, students and DASS will work together regarding classroom accommodations. You are encouraged to discuss approved accommodations with your faculty.
2. Please review these additional pertinent policies to: Nondiscrimination policy, Honor Code, Sexual Harassment, and Withdrawal from courses.

Academic Honesty/Dishonesty: By enrolling at CSU Channel Islands, students are responsible for upholding the University's policies and the Student Conduct Code. Academic integrity and scholarship are values of the institution that ensure respect for the academic reputation of the University, students, faculty, and staff. Cheating, plagiarism, unauthorized collaboration with another student, knowingly furnishing false information to the University, buying, selling or stealing any material for an examination, or substituting for another person may be considered violations of the Student Conduct Code (located at http://www.csuci.edu/campuslife/student-conduct/academic-dishonesty.htm). **If a student is found responsible for committing an act of academic dishonesty in this course, the student may receive academic penalties including a failing grade on an assignment or in the course, and a disciplinary referral will be made and submitted to the Student Conduct & Community Responsibility office.** For additional information, please see the Academic Senate Policy on Academic Dishonesty, also in the CI Catalog. Please ask about my expectations regarding academic dishonesty in this course if they are unclear. Academic dishonesty includes:
*   Cheating – attempting to use unauthorized materials, information, or study aides in any academic exercise.

- Fabrication – falsifying or inventing of any information or citation in an academic exercise.
- Facilitating academic dishonesty – intentionally or knowingly helping or attempting to help another to commit an act of academic dishonesty.
- Plagiarism – intentionally or knowingly representing the words, ideas, or work of another as one's own in any academic exercise, e.g., copy and paste text.

Safe Assign/Turnitin Statement: To ensure the integrity of the academic process, CSU Channel Islands' University Nursing Program endorses the importance of academic honesty as defined by the University Catalog and Nursing Student Handbook: http://catalog.csuci.edu/ and http://nursing.csuci.edu/currentstudents/index.htm. Therefore, in an effort to detect and prevent plagiarism, faculty members at CSU Channel Islands may use tools called Safe Assign or Turnitin to compare a student's work with multiple sources. The tool itself does not determine whether a paper has been plagiarized. Instead, that judgment is determined by the individual faculty member.

Campus Resources

John Spoor Broome Library: Broome Library offers a wide array of services, including access to literature, cameras, computers, laptops, printers, study rooms, IT Help, Learner Resource Center (tutors), and Writing & Multiliteracy Center. Further information can be obtained on the library website at http://library.csuci.edu/services/

Campus Tutoring Services: You are encouraged to make regular use of campus tutors and/or peer study groups, beginning in the second week of the semester. For campus tutoring locations, subjects and hours, go to: http://go.csuci.edu/tutoring.

Civil Discourse Statement: All students, staff and faculty on our campus are expected to join in making our campus a safe space for communication and civil discourse. In 2016, CI faculty (through the Academic Senate) voted to approve Resolution SR 16-01 titled, "Commitment to Equity, Inclusion, and Civil Discourse within our Diverse Campus Community." If you are experiencing discomfort related to the language you are hearing or seeing on campus (in or out of classes), please talk with a trusted faculty or staff member. Similarly, please consider whether the language that you are using (in person or on Canvas) respects the rights of others to "engage in informed discourse and express a diversity of opinions freely and in a civil manner."

Emergency Intervention and Basic Needs: As CI's website points out, "a recent study commissioned by the CSU Chancellor's Office shows that nearly 25 percent of CSU students either regularly skip meals for financial reasons or lack access to toiletries and sufficiently nutritious food options. In addition, more than 10 percent are displaced from their homes due to things like an unexpected loss in income or personal safety issues." If you recognize yourself, or someone you know from this description, please know that there are resources on campus

to help, including the Dolphin Food Pantry for students which offers free food, toiletries and basic necessities. The Dolphin Pantry is currently located in Arroyo Hall, Room 117 and is open Monday – Friday 8:30 – 4:30 (please check the website below for updates). Emergency housing and funds are also available. More information on these, and other services available at CSUCI can be found at: https://www.csuci.edu/basicneeds/

Counseling and Psychological Services (CAPS)
CAPS is pleased to provide a wide range of services to assist students in achieving their academic and personal goals. Services include confidential short-term counseling, crisis intervention, psychiatric consultation, and 24/7 phone counseling. CAPS is located in Bell Tower East, 1867 and can be reached at 805-437-2088 (select option 1 on voicemail for 24/7 phone counseling); you can also email us at caps@csuci.edu or visit our website at https://www.csuci.edu/caps.

Title IX and Inclusion

Title IX & Inclusion manages the University's equal opportunity compliance, including the areas of affirmative action and Title IX. Title IX & Inclusion also oversees the campus' response to the University's nondiscrimination policies. CSU Channel Islands prohibits discrimination and harassment of any kind on the basis of a protected status (i.e., age, disability, gender, genetic information, gender identity, gender expression, marital status, medical condition, nationality, race or ethnicity, religion or religious creed, sexual orientation, and Veteran or Military Status). This prohibition on harassment includes sexual harassment, as well as sexual misconduct, dating and domestic violence, and stalking. For more information regarding CSU Channel Islands' commitment to diversity and inclusion or to report a potential violation, please contact Title IX & Inclusion at 805.437.2077 or visit https://www.csuci.edu/titleix/.

Resources for Writing
   ❖ Cal State Channel Islands is committed supporting student writing and resources available to students for academic success. If you struggle or are struggling with writing, please contact the University Writing Center. There is limited availability in the summer, but the Campus Writing Guide is available online.
   ❖ Another useful resource for APA writing assistance is online through Purdue University Online Writing Lab (OWL). There is also a resource on this site with specific examples and instructions for current APA format.

Nursing Program Self-Care Statement
Self-care practices can greatly impact health both short-term and long-term. In order for nursing students to effectively care for others, they need to take care of themselves. Self-care practices not only reduce compassion fatigue and burnout, but also supports nursing's role in cultivating self-care behavior in clients, families, and communities. As faculty, we encourage **exercise, hydration and rest** by nursing students in learning settings that include the classroom, lab and clinical: *exercise* in the form of walking during breaks to clear the cluttered mind; *hydration* with water at breaks [were you aware that nursing students consume approximately

16 ounces less water on clinical days (Nevins & Sherman, 2014)]; and, *rest* by adhering to the University's Class Schedule Template Policy in providing 10 minute breaks for every hour of class or lab, following agency policy based on personnel law regarding breaks, and encouraging 7 – 8 hours of sleep each night.

Inclusivity and Implicit Bias Statement

The CSUCI Nursing Faculty strives to provide culturally responsive teaching approaches in all classes with the aim of embracing cultural humility as part of the professional nursing role. We celebrate the diversity that all students and faculty bring to each class and view these differences as a resource, strength, and benefit for all. We aim to present materials and activities that are respectful of diversity including but not limited to: gender, sexual orientation, disability, age, socioeconomic status, ethnicity, race, culture, perspective, and other background characteristics. (See Inclusivity and Implicit Bias Statement & Training Requirements in the Program Student Handbook). To address health disparities faced by Black people as a result of racism in the health care system, AB 1407 states that all approved schools of nursing or approved nursing programs must include direct participation in one hour of implicit bias training, as specified, as a requirement for graduation.

Course discussions and interactions may not always be easy as we explore these challenging issues; we sometimes will make mistakes in our speaking and our listening; sometimes we will need patience or courage or imagination or any number of qualities in combination to engage our texts, our classmates, and our own ideas and experiences. The expectation is that all students and faculty will listen and respect others with an openness to different perspectives, fostering an accepting space for all. In an ideal world, science would be objective. However, much of science is subjective and historically lacks equitable representation. In this class, we will try to integrate materials from a variety of perspectives, but limits still exist on this diversity. We acknowledge that both implicit and explicit biases exist in all materials due to the lens with which it was produced or developed. Incorporating a diverse set of experiences is important to mitigate bias to gain a more comprehensive understanding of nursing science.

Course Policies

Late Work: Late or missing discussion assignments will affect the student's grade. Be sure to pay close attention to deadlines—there will be no make-up assignments or quizzes, or late work accepted without a serious and compelling reason and instructor approval. (Refer to university catalog). All assignments except exams may be completed earlier than the due date. **No assignments will be accepted after the assignment due date.**

Attendance: To ensure that students are prepared to enter nursing practice after graduation as well as to comply with BRN regulations and CCNE Accreditation Standards, students are required to attend all clinical days and lab session. For more information about the Nursing Program attendance policies refer to the Clinical Attendance Policy and Clinical Make-up Policy in the Nursing Student Handbook https://nursing.csuci.edu/currentstudents/index.htm

Dress Code: Student are expected to abide by the dress code described in the Nursing Student Handbook https://nursing.csuci.edu/currentstudents/index.htm#handbook when attending clinical or participating in scheduled and open lab hours.

Appropriate dress will depend on the type of agency student is assigned. Students will either wear business casual attire or school uniform. Some agencies may require students to wear a lab coat. Students must wear CSUCI name pin in the clinical setting. Please check with agency prior to the start of clinical. Under no circumstance are students allowed to wear blue jeans. Students will wear appropriate footwear, as some agencies require closed-toed shoes (no sandals, flip flops, or high heels). If students don't comply, they will be sent home and not receive clinical hours. Compliance with Guidelines for Professional Image in handbook is mandatory.

Body Art and Piercings: You will comply with the policy of CSU Channel Islands Nursing Program and your clinical site in covering body art and visible body piercings (other than acceptable ear piercings).

HIPAA Compliance: It is the policy of the CSU Channel Islands' Nursing Program and clinical partner agencies to ensure students are knowledgeable and compliant with privacy and security of patient protected health information. Knowledge of privacy and security shall occur through orientation to agency policy. At the beginning of the clinical rotation for NRS 201, the student must review the Nursing Program policies on HIPAA Privacy Rule and Social Media Policy in the Student Handbook, http://nursing.csuci.edu/currentstudents/index.htm). NRS 201 students must complete the ATI Tutorial - HIPAA Skills Module: Terminology/Enunciator; Step-by-Step Viewing (all modules); per policy, the student is to return acknowledgement after completion of the ATI Skills module to the Instructor or Nursing Officer personnel.

Confidentiality: Information from the clinical facility is of limited access and you are expected to follow the facility guidelines in accordance with HIPAA regulations. Any violation of these regulations may result in immediate failure in the course. *Photographs and media are not allowed in the clinical setting.* Please refer to the Nursing Program and clinical agency social media policy for questions about appropriate practices using social media during this course. Assurance of compliancy is actively monitored by the course instructor throughout the clinical rotation, including verification by the student attesting to compliancy through an on-line survey after each clinical day. **The student on-line response to a survey on compliancy or lapse of compliancy must be completed by 0800 the following day after each clinical.**

Assessment: Clinical application involves only the evaluation of critical behaviors and clinical skills. A grade of pass/fail is given. Critical behaviors (those behaviors having emphasis on safety, professional growth and improvement that are specific to content in each course) are passing if the student is able to accomplish them safely and competently. Performance of clinical skills will be judged as pass (safe and competent) or fail (unsafe and less than competent). Evaluation is based upon observation of student performance, i.e., return

demonstration in a clinical or comparable setting. Students may feel free to contact the instructor for clinical evaluation of critical behaviors whenever they feel competent enough to carry out these new skills. Evaluation may take place in simulated clinical surroundings, when appropriate as well as the clinical laboratory itself. **Grading of clinical work will be based on the categories in the Clinical Evaluation Tool (CET) which is pass/fail and other assignments.** In preceptor-based upper division clinical, the semester-long assignments will make up the points in establishing the clinical grade for passing. There must be a passing grade on the CET as well as a minimum letter grade of C in the clinical assignments to pass the 76% passing percentage in the clinical course.

If a student is failing in a clinical course at any time in the semester with a grade less than Pass/Credit or with demonstrated unsafe patient care behaviors as outlined in the Clinical Evaluation Tool, the student can be failed and removed from the clinical setting at any time in the semester.

Students not performing critical behaviors at the level expected may be put on clinical remediation. The process for clinical remediation is outlined in the Clinical Remediation Policy in the Nursing Student Handbook https://nursing.csuci.edu/currentstudents/index.htm

NRS 453 is a pass/fail clinical. However, students must receive a minimum of 76% in each assignment to successfully pass the course. In addition, students must pass the CET to successfully pass NRS 453. Therefore, even if all the assignments have been passed, students must still pass the CET to successfully pass the course.

Letter Grade for assignments	%
A	95-100%
A-	90-94.9%
B	85-89.9%
B-	80-84.9%
C	76-79.9%
D	65-75.9%
F	64.8% and below

Contact with CSUCI faculty: Faculty will be available by phone on any clinical day as scheduled. Faculty will read weekly journaling postings to evaluate student's clinical experiences. If any significant or unexpected issue arises during the clinical day, the student is expected to contact faculty the same day.

HIPAA Concerns: Should the student become aware of the inappropriate release of protected health information or if sensitive agency information is disclosed in a manner not consistent with the HIPAA Policy, the student will notify faculty and the HIPAA Compliance Officer

immediately. HIPAA non-compliance may generate a remediation plan or a failing CET depending on violation.

Preceptor Evaluation and Course Pass-Fail Grade: Student's preceptor will evaluate the student's clinical performance and will complete an evaluation form. This evaluation form will be used to assist in generating "pass-fail" marks for competencies in the student's CET. The weekly journaling and assignments will generate points and will be used to calculate the final Pass-Fail grade. Preceptor evaluation form must be turned in by final CET meeting. In order to receive a passing grade in the course, all assignments must receive a 76% or higher and a passing CET.

Clinical Tools: The student is responsible for completing and uploading the Student and Preceptor Information and Agreement within the first week of the semester. Student will also evaluate the preceptor and clinical site at the end of the semester; these surveys are to be completed on Canvas. All forms including the Record of Clinical Hours, Preceptor Evaluation of Student, Information and Agreement and Student's Evaluation of Clinical Site must be completed for a successful completion of 453. All Forms are located in Canvas. Grades cannot be issued until all forms have been turned in signed and dated. **If the student earned 76% of the course points or more, yet does not turn in the required clinical forms, an "Incomplete" will be given for the course.**

To Pass the Course, students must:
1. Turn in signed preceptor agreement first week of clinical.
2. Complete a total of 135 hours of clinical time, including weekly journal.
3. Earn at least 76% in each assignment
4. Pass all community health competencies listed in Clinical Evaluation Tool (CET)
5. Turn in student time sheet, site evaluation, preceptor evaluation of student at final CET meeting

Requirements/Equipment:
1. Driver's license and properly insured automobile
2. BLS CPR
3. Required health clearance
4. Appropriate clothing and grooming according to university guidelines, as well as agency guidelines
5. CSUCI Nursing ID to be worn according to university dress code
6. Lab coat if agency requires
7. Some agencies may require supplies such as stethoscope and blood pressure cuff

Clinical Sites: Clinical sites will provide a wide range of experiences, such as public health, home health, hospice, vulnerable population groups, and school health. Since each clinical site is unique, not all students will be involved in the same clinical activities. Based on the individual site and population, the faculty may include other activities that will benefit the participants at the site. Students will remain in their agency throughout the semester. During the course students will discuss their sites with their peers for a comprehensive clinical overview.

Students may not participate in any clinical activity in which they have not received both didactic and skills lab experience (i.e. blood draws).

If a student is asked to leave an agency due to unprofessional behavior, the student will fail the course. There is no option to change to a different agency.

Clinical Attendance and Etiquette: Attendance in clinical laboratory is mandatory. As a general policy, the student can only miss 10% of clinical hours without jeopardizing their ability to meet and fulfill the clinical objectives of the course. All clinical hours must be logged and signed by your preceptor (see Record of Clinical Hours form). You must have **112 total clinical hours**, your remaining hours are non-clinical hours, see table for breakdown of hours on page 16. You will receive an incomplete if you do not complete 135 total direct and non-direct care hours.

If an unusual event occurs and your clinical day or site location changes, inform your faculty two days in advance. Contact agency preceptor and clinical faculty if ill and not able to attend clinical.

→ Do not work on other classes or personal business including social networking during community health clinical time.

→ When scheduling your clinical time, ensure it is not in conflict with any other class or lecture days. Also ensure your faculty's schedule can accommodate the day and time for the community health intervention.

If the student does not invest the interest or motivation to perform at least at a satisfactory level in this clinical, the student may be removed from the clinical setting. This will result in not meeting the course objectives and a failing grade.

Clinical Schedule: Students will be assigned a clinical day but may attend a different clinical day for unique experiences with faculty approval. Refer to Extra Hours and Outside Experience form provided in Canvas if the student wishes to attend an alternative activity. Students are to remain at agencies for the whole semester. However, if a student completes the 135 hours prior to the last day, the student may stop attending clinical after completing the 14th week of clinical.

If the student is able to complete their mandatory hours by that date, the agencies and faculty must be informed. If the agency is relying on the student to assist in any type of health service, the student must attend even if 135 hours have been completed.

Cell Phone Use: Students will be responsible for respecting all agencies guidelines in respect to the use of cellular phones within the agency. If the agency does not have a specific guideline restricting cellular use, students are to turn off their cell phone ringers during the clinical time. If a student must be available they will need to set their phone to "vibrate" and step outside to answer the phone without disturbing the preceptor, meeting or clinical activity. Further, since cell phones have cameras, picture-taking and video recording are forbidden unless photos are a

part of the community project and proper permission guidelines are followed. All aspects of the CSU Channel Islands Social Media Policy will be followed.

Teaching/Learning Methods: Clinical practice, clinical conference, discussion, role play, Canvas discussions, and written assignments.

Class Recording Policy: Students may not record (audio or video) in this class except in accordance with approved ADA accommodations. Any recordings made in connection with a disability accommodation are for the student's personal academic use only and may not be distrusted in any manner to any other individual.

Medication administration policy for NRS 453

General information:
1. A baseline assessment that includes vital signs, physical exam of vital systems, and reason for admission along with documentation of review of all ordered medications (pharmaceutical and therapeutic classifications, action, dosage, specific time frequency, side effects, associated vitals or diagnostics) must be completed by the student prior to medication administration to assure safe, effective outcomes.
2. The use of three checks and six rights are expected minimum safety elements to be followed during all medication administration experiences
3. Students should provide patient education during administration, including at a minimum the name, purpose and common side effects of the drug, to support patient-centered care.
4. Access to the medication dispense system (accudose/omnicell/pyxis) is agency controlled and at the discretion of the faculty; the medication dispense system capability for inventory control, including pre-counts on high cost/risk drugs, is password controlled intended for access by licensed and pharmacy personnel.
5. Students are not allowed to administer IV push medication or IV drip medications; IV push and drip medications are complex and require licensed competency.
6. Medications are not administered by students in NRS 201, 233, 241 and 461 based on level of the learner, the course expectations, and agency policy.

NRS 453: Community Health Nursing
1. Students are able to administer oral (PO), intramuscular (IM), intradermal (ID), subcutaneous (SC, SQ), inhalation, and topical medications under the supervision of the precepting RN as allowed per policy or at the discretion of the preceptor.
2. The student communicates and coordinates administration of medications with the precepting RN assigned to the selected patient(s).
3. The student prepares the medication under the supervision of the precepting RN.
4. The precepting RN reviews the orders, the medications with the student prior to administration, and supervises the administration process, including documentation.

Course assignments and due date (all assignments are due on according to the stated due date in Canvas)

Due Date	Assignment	Points (%)	Comments
Weekly Journals x14 (The 14th journal is a self-reflection)	Journals	70 (14%)	See rubric (students must respond to 2 of their peers' posts weekly on each of the required discussion boards)
Due by the end of the 1st week of clinical	Signed Preceptor Form	Included in final CET points	Forms located on Canvas, Upload in Assignments
Due by the end of the 3rd week of clinical	Group Contract signed	15	*Group points given*
Due by the end of the 6th week of clinical	Assessment Assignment	30	Under Assignments *Individual points given*
Due by the end of the 7th wk of clinical	Mid Term CET Due	Included in final CET points	
Due by the end of the 8th week of clinical	Analysis and Diagnosis Assignment	15	Under Assignments *Individual points given*
Due by the end of the 11th week of clinical	Planning, Evaluation, and Implementation	65 [Total for written part of project = 125 (25%)]	Under Assignments *Individual points given*
TBA	Community project presentation	80 (16%)	*Group points given*
Peer Critique of Final Project		Counted as clinical hours.	Critique the other 2 presentations on discussion board. Details on Canvas
Last week of Clinical	All Final Paperwork due including Final CET	225 P/F (45%)	This grade is based on the preceptor feedback, mid-term CET, & CET evaluation at the end of the course
Total		500	

Clinical conference: We have will have a zoom session the 1st week of class for orientation. We will then have 3 zoom or face-to-face clinical conferences during the semester. The 1st of these sessions will be with both the student and their preceptor- the dates will vary depending on students and professor's availability. The 2nd meeting will be the individual Midterm meeting and the 3rd and final Zoom meeting will be towards the end of the semester and will count as your final CET meeting.

Course Hours Breakdown

Site or experiences		Direct care hours
Week/Dates	**Assignments**	104 (8 hrs X 13 wks)
Week 1 8/21	• Whole class orientation via Zoom at 8/22 at 11am • HIPPA Form Due 08/25 • Clinical Absence Form Due 08/25	
Week 2 (1st week of Clinical) 8/28	• Weekly Journal #1: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Preceptor/Student Agreement form due 9/1 following first clinical shift	
Week 3 9/4	• Weekly Journal #2: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight.	
Week 4 9/11	• Weekly Journal #3: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Group Contract & Population Selection due 9/15	
Week 5 9/18th	• Weekly Journal #4: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • One-on-one conferences via zoom or in-person on-site, time & day TBD	
Week 6 9/25	• Weekly Journal #5: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight.	
Week 7 10/2	• Weekly Journal #6: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Assessment Assignment due 10/6	
Week 8 10/9	• Weekly Journal #7: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Mid-Term CET Evaluations- due 10/13	
Week 9 10/16	• Weekly Journal #8: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Analysis and Diagnosis Assignment due 10/20	
Week 10 10/23	• Weekly Journal #9: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight.	
Week 11 10/30	• Weekly Journal #10: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Planning/Implementation/Evaluation Assignment due 11/3 • One-on-one conferences via zoom or in-person on-site, time & day TBD	
Week 12 11/6	• Weekly Journal #11: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight.	
Week 13 11/13	• Weekly Journal #12: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Community Project Slide Presentation due 11/17	

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Week 14 11/20	• Weekly Journal #13: Initial Post due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. • Summary of Individual Contribution due 11/24 • Peer review of final project due 11/27 Will receive 3 clinical Hours	
Week 15 11/27	• * Journal #14 due Sunday midnight following the clinical day and responses due the following Tuesday Midnight. *This journal is a self-reflection statement. • Final CET due 12/1 • Clinical Site & Preceptor Evaluation due 12/1 • Record of Clinical Time Form due 12/1	
Agency (including orientation if agency has one)		
Community assessment- windshield survey, group contract peer review of project		15
Additional clinical activities (Any make up clinical hours will be discussed and decided upon with Preceptor, Instructor and Student)		TBD
Journals/discussion boards & post-conference		
Total		119

Course Outline

Instructions for Individual Assignments

Weekly Journals (70 points):

I am very excited to observe your growth and development as you share your clinical experiences and connect your course learning objectives with elements learned in your didactic course. Although I will read/view all the journals submitted, I may not comment on every post, to allow your peers to comment and respond to your initial post. If there is a special case or a concern regarding a posting, I will respond to the entire group or individually.

Journal Assignment: Each student will be required to write, or video record, a journal after each clinical week with two stated objectives for the week. These objectives will be based on the needs of the agency, the student's goals, and the course objectives. The purpose of this assignment is to enhance critical thinking and the nursing process. These journals enable all clinical members to learn from each other. In addition, the journals assist the faculty in making sure students are having a productive rotation. The journals count for one hour of weekly post-conference. Students are expected to read **all** of their peers journal entries although it is only expected that you submit two responses.

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Each journal entry must include:
- Description of your clinical objective(s) and your ability to accomplish your objectives, and a succinct yet thoughtful description of the day
  - Provide a critical analysis of the experience
  - Link lecture content and QSEN competencies with what you are experiencing. Explain why you are identifying specific QSEN Domains
  - Two to three essential public health services observed in the clinical setting and explain why you are identifying these specific functions (See Community/Public Health Nursing Core Competencies & 10 Essential Services on the modules page)
- Respect for Agency privacy/HIPAA in journaling
- Two responses to peers on the "Discussion Forums" for the designated week.
- If a clinical summary with responses are not posted by the assignment deadline, 2 points per day will be deducted for being late.
  - If journaling is 7 days late or if it does not substantiate the student's clinical activities, student will be presumed absent from clinical and will not be given credit for the clinical day.

Journal Rubric

	5 points	3 points	0 points
Weekly Journaling **Remember:** **Students are expected to apply lecture content to their clinical experiences**	Prepared for clinical with objectives and essentially completed them; wrote succinct description and provided a critical analysis of the day; demonstrated understanding of the PHN core competencies. Linkage of lecture content with clinical; Provided personal insights. Demonstrated understanding of Knowledge-Skills-Attitudes in each QSEN Domain. Used appropriate language, avoided colloquialisms and/or texting abbreviations. Respects HIPAA: does not disclose Patient PHI or Agency Sensitive information: Completed within timeframe.	Reported to clinical with objectives most of the time and sometimes met them; journaling provided description yet had typos or texting abbreviations and/or colloquialisms; occasionally linked with lecture; moderated understanding of PHN core competencies. Developed a few Knowledge-Skills-Attitudes in each QSEN Domain yet contained minimal descriptions, Occasional personal insights; Details of clinical day contains SOME sensitive agency information and/or SOME patient PHI; Late penalty: **-2 points per day**	Reported to clinical with an idea of what to do yet really didn't formalize a plan; weekly description was weak which didn't allow faculty to fully evaluate the student's clinical day; numerous typos, used informal language and/or texting abbreviations; minimally linked lecture with clinical; Limited understanding of PHN core competencies. Developed few Knowledge-Skills-Attitudes in each QSEN Domain. Limited personal insights; Violated HIPAA by releasing Patient PHI or release sensitive agency information; Late penalty: **-2 points per day**

Community Assessment Project and Intervention (Individual and Group Assignment)

General Instructions:
1. Apply knowledge gained from the text, research, and lecture.
2. Each group will consist of 3-4 students from the same clinical course section.

The **Group Contract** along with the **Community Assessment** elements will be worked on collaboratively.

- The group will create a collaboration for their project. All work related to this assignment should be done in the collaborations via google docs. Each member of the group will be responsible to contribute to development of the group contract and community assessment.
- Please submit one contract per group to the appropriate Canvas group link.

Clinical Conference Discussions will be based on the community assessment elements throughout the semester. The final project will be recorded through google record or VoiceThread and presented to the entire clinical group. Once the project is presented, each student will provide feedback via the discussion board on the projects presented.

Prior to starting the assignment:
- **Identify an at-risk population in the community.** Examples of local at-risk populations include but are not limited to homeless individuals, frail elderly, LGBTQIA+ individuals, farmworkers, recent immigrants, incarcerated individuals, victims of crime, children with special needs, women without access to ob/gyn care etc. Along with picking an at-risk population, you will also pick an area you will be focusing on i.e., Ventura, Oxnard, Santa Barbara etc… Best to select an area where you live since you will be going out into the community for your research .

Group Contract and Population Group at Risk (15 points)
- Each member of the group will contribute to a group contract. This group contract is your group's creation. The expectation is that you to make a plan your group can follow to ensure success in your project.
- A group contract is a plan, model, or outline, setting guidelines within your group. This contract should foster open communication, encourage mutual respect, and determine participant roles. You should consider including some of the following:

- member strengths, limitations, and values
- team member roles and accountabilities
- communication style and communication plan
- leadership style
- strategies for successful team functioning
- how you plan to accomplish assignments
- managing conflict, such as communication issues, late work, or workload balance
- **Population Group at Risk selection (MUST BE INCLUDED IN THE CONTRACT)**: You will need to select a community/city for your community needs Assessment.

Please submit one contract per group to the appropriate Canvas group link.

***Any group member may contact the instructor directly in confidence if there are concerns about the dynamics of the working group or if a team member is not fulfilling their role.

Assessment (30 points):
1. Windshield Survey
2. Identify the social determinants of health (SDOHs) that are impacting the health of your population. Use the definition used by Healthy People 2030 for identifying the SDOHs for your chosen population (https://health.gov/healthypeople/objectives-and-data/social-determinants-health)that are impacting the health of your population. Consider all of the following:
   a. Housing
   b. Education
   c. Employment
   d. Structural Barriers to Healthcare
   e. Availability and sufficiency of resources
   f. Presence of biases such as racism, homophobia, and immigration status that are impacting their ability to access services and/or community resources.
3. The presentation of the assessment must include:
   a. Definition and description of the population
   b. Results of the windshield survey of a geographic community in which the population lives.
   c. Brief description of the SDOHs you identified that are impacting the population.
4. You are required include vital statistics information including morbidity and mortality data, if available.
5. Interview a minimum of five members of the community (include members of the community who have different backgrounds [socioeconomic status, educational attainment, employment history]). to identify their priority needs, what they perceive is negatively impacting their health, and what community resources they have been able

to access. Community members should represent the experiences of different age groups and gender.

6. Interview a minimum of three community stakeholders such as clergy, social workers, public health nurses, and other service providers to identify their priority areas for change.

7. Compare information gathered from your interviews regarding the social determinants of health that are impacting your selected population with data from a reliable source: such as the Local Health Plans of California, Centers for Disease Control, and Healthy People 2030 so that you are better able to prioritize the intervention you will develop for this assignment.

Analysis and Diagnosis (15 points)

1. Develop a Priority Matrix of the social determinants of health you identified. Criteria to use for weighting and rating the concerns are (Refer to Muecke's article table 3 for example):
   - Community awareness of the problem
   - Community motivation to resolve the problem
   - Nurse's and the health care team's ability to influence a solution
   - Availability of expertise
   - Availability of resources
   - Severity if the problem remains unresolved
   - How rapidly can the problem be resolved
2. Identify three priority health issues

Planning (20 points)

1. Outcomes (SMART)
   a. Healthy People 2030:
      1. Overarching Goal
      2. Focus Area and Goal
      3. Development Objective or research objective, including number

Implementation (30 points)

Description of how you would implement the planned intervention

1. Community/public health nursing interventions with rationale (evidence-based support) for each outcome using either:
   a. Essential Public Health Services
   b. Minnesota Public Health Intervention Wheel

Evaluation (15 points)

1. Develop an evaluation plan. Include in the plan input, process, and outcome objectives.
2. Describe how you would determine if your objectives were met during implementation and at the conclusion of the intervention

Planning/Implementation/ Evaluation will be graded as one assignment (65 points)

At the end of the project, each group member will provide a summary of the work done on the project. The summary must include detailed information about the hours contributed to each component of the project for the individual and the combined group.

Community Assessment Project Assignment Rubric:

Assessment	30.0 to >24.0 pts **Exceeds Standards** All assignment elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors.	24.0 to >18.0 pts **Meets Standards** Most elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors.	18.0 to >12.0 pts **Approaches Standards** Most assignment elements were complete with few errors in accuracy and reflected mostly current relevant statistics and information.	12 to >0 pts **Below Standards** Significant gaps in required elements were observed. Extensive errors in the accuracy and currency of the information presented were found.	30
Analysis and Diagnosis	15 to >12 pts **Exceeds Standards** All assignment elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors	12 to >9.0 pts **Meets Standards** Most elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors.	9.0 >6pts **Approaches Standards** Most assignment elements were complete with few errors in accuracy and reflected mostly current relevant statistics and information.	6.0 to >0 pts **Below Standards** Significant gaps in required elements were observed. Extensive errors in the accuracy and currency of the information presented were found.	15
Planning	20.0 to >16.0 pts **Exceeds Standards** All assignment elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors	16.0 to >12.0 pts **Meets Standards** Most elements were complete, accurate, and reflect current relevant statistics and information (less than 5 years) with no factual errors.	12.0 to >.8.0 pts **Approaches Standards** Most assignment elements were complete with few errors in accuracy and reflected mostly current relevant statistics and information.	8 .0 to >0 pts **Below Standards** Significant gaps in required elements were observed. Extensive errors in the accuracy and currency of the information presented were found.	20
Implementation	30.0 to >24.0 pts **Exceeds Standards** All assignment elements were	24.0 to >18.0 pts **Meets Standards** Most elements were complete,	18.0 to >12.0 pts **Approaches Standards**	12.0 to >0 pts **Below Standards** Significant gaps in required elements	30

	complete, and accurate and reflect EBP.	accurate, and reflect EBP	Most assignment elements were complete with few errors in accuracy and reflect EBP.	were observed. Extensive errors in accuracy and inconsistent in EBP.	
Evaluation	**15.0 to >12.0 pts Exceeds Standards** All assignment elements were presented completely and accurately.	**12.0 to >9.0 pts Meets Standards** Most elements were presented completely and accurately.	**9 .0 to >6.0 pts Approaches Standards** Most assignment elements were presented entirely with few errors in accuracy..	**6.0 to >0 pts Below Standards** Significant gaps in required elements were observed. Extensive errors in the accuracy and currency of the information presented were found	15
Group Contribution (Group Contract = 15 points)	**15.0 to > 12.0 pts Exceeds Standards** Student demonstrated: complete fulfillment of their roles and responsibilities as per the Group Contract, submitted high-quality project contributions, met deadlines as agreed, and worked cooperatively with other group members.	**12.0 to >9.0 pts Meets Standards** Student demonstrated less than adequate fulfillment of their roles and responsibilities as per the Group Contract, submitted incomplete or inadequate project contributions, had difficulty meeting most deadlines as agreed, and/or had difficulty working cooperatively with other group members.	**9.0 to > 6.0 pts Approaches Standards** Student demonstrated less than adequate fulfillment of their roles and responsibilities as per the Group Contract, submitted incomplete or inadequate project contributions, had difficulty meeting most deadlines as agreed, and/or had difficulty working cooperatively with other group members.	**6.0 to >0 pts Below Standards** Student was unable to demonstrate fulfillment of their roles and responsibilities as per the Group Contract, submitted incomplete or inadequate project contributions, had difficulty meeting deadlines and/or had difficulty work cooperatively with other group members	15
Total: 125 pts					

Community Project Presentation Rubric (80 points):

At the bottom of each slide please add name of student

Criteria	Rating				Pts
Oral Presentation/ Delivery	**20 to >16 pts Exceeds Standards** Students are well prepared. Speaks clearly and at understandable pace; well-rehearsed; no use of filler words (umm, like, you guys), within time limits; maintains eye contact. Team cooperation always smooth.	**16 to >12 pts Meets Standards** Students are fairly prepared. Speaks clearly and at an understandable pace, most of the time; could use more rehearsal; each filler work will be a deduction of 1 point use of filler words (umm, like, you guys), within time limits; maintains eye contact; Establish eye contact most of the time. Team cooperation is most of the time smooth.	**12 to >8 pts Approaches Standards** Students are somewhat prepared. Difficult to hear, speaks at a fast rate' lacks rehearsal; no use of filler words (umm, like, you guys), within time limits; looks at notes instead of audience majority of time; each filler work will be a deduction of 1-point use of filler words (umm, like, you guys), within time limits; Establish eye contact sometimes. Team cooperation sometimes smooth.	**8 to >0 pts Below Standards** Students do not seem prepared. The volume is too soft to be heard. Establish no eye contact. Partners do not seem cooperative. each filler work will be a deduction of 1 point use of filler words (umm, like, you guys),	20
Content & Accuracy	**40 to >36 pts Exceeds Standards** All content on slides is accurate. There are no factual errors. Assessment, diagnosis, planning, outcome, implementation, and evaluation are presented with time frame and importance of information taken into consideration; Includes Muecke chart, Healthy People 2030 goals and objectives,	**35 to >32 pts Meets Standards** Most of the content is accurate. There are 1 or 2 factual errors. One of highlighted content is missing or not presented in presentation, all assessment is presented	**32-30pts Approaches Standards** There are many inaccuracies in the content. Two of the highlighted are missing or not presented, missing several assessments	30 **to >0 pts Below Standards** Too much time spent on some details of assessment with no time for other aspects of assignment such as diagnosis, Healthy People 2030 and interventions.	40

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	5 to >4.25 pts	4.25 to >3.5 pts	3.5 to >2.75 pts	2.75 to >0 pts	
	public health core functions & essentials, and intervention wheel				
Use of Graphics	**5 to >4.25 pts** **Exceeds Standards** All slides have graphics to support all information.	**4.25 to >3.5 pts** **Meets Standards** At least 10 of the slides have graphics to support all information	**3.5 to >2.75 pts** **Approaches Standards** Some of the slides have graphics but don't support the information.	**2.75 to >0 pts** **Below Standards** Many of the slides have no graphics.	5
Text/Font Choice & Formatting	**5 to >4.25 pts** **Exceeds Standards** Font formats (e.g. color and style have been carefully planned to enhance the readability and content on all slides.	**4.25 to >3.5 pts** **Meets Standards** Font formats (e.g. color and style have been carefully planned to enhance the readability on 75% of the slides	**3.5 to >2.75 pts** **Approaches Standards** Font formats (e.g. color and style have been carefully planned to enhance the readability and content in 50% of slides.	**2.75 to >0 pts** **Below Standards** Project has more than 5 misspellings and/or capitalization errors.	5
Spelling and Capitalization	**5 to >4.25 pts** **Exceeds Standards** Project has no misspellings and/or capitalization errors on all slides.	**4.25 to >3.5 pts** **Meets Standards** Project has between 1-2 misspellings and/or capitalization errors on all slides.	**3.5 to >2.75 pts** **Approaches Standards** Project has between 3-4 misspellings and/or capitalization errors on all slides.	**2.75 to >0 pts** **Below Standards** Many of the slides have no graphics.	5
Organization	**5 to >4.25 pts** **Exceeds Standards** Content is well organized using headings or bulleted lists to group related material on all slides	**4.25 to >3.5 pts** **Meets Standards** Content is well organized using headings or bulleted lists to group related material on many of the slides.	**3.5 to >2.75 pts** **Approaches Standards** Content is well organized using headings or bulleted lists to group related material on only some of the slides.	**2.75 to >0 pts** **Below Standards** Content is not well organized.	5
					80 pts