Syllabus for Mental Health and Community Health Nursing Lecture

Nathon S. Kelley, Sandra Newsome, and Donna M. Ritchie

Ferris State University
Syllabus for Mental Health and Community Health Nursing Lecture

The creation of a syllabus is an important part of how an instructor communicates the manner in which the course will operate and develop. The syllabus sets the tone for the course weather that is: warm and friendly, formal, condescending, or confrontational (Center for Teaching Excellence, 2012). An effective syllabus spells out the expectations for the course in detail and lists how the student will be evaluated. An educator would want to assess the students learning styles and adjust their teaching technique based on that assessment.

With these thoughts in mind a syllabus was created for a combination mental health and community health nursing class. A group of three individuals was created to assemble this syllabus. This paper will look at the process that the group used to create the syllabus. An assessment of how decisions were made and conflict resolutions will be discussed.

Course Objectives

The course framework is comprised of the outcomes, competences, and objectives (Billings & Halstead, 2009). Billings & Halstead (2009) note that the use of learning outcomes was prevalent during the 1980’s when accrediting agencies encouraged educators to focus on measuring student performance. Since then the expectation of graduates has expanded. Employers want competent and knowledgeable nurse graduates who can function proficiently in the workforce.

The course objective describe what the instructor wants the student to learn, while the outcomes indicate what the student actually learned (University of Connecticut, 2011). Course objectives can be written to reflect the three learning domains, which are cognitive, affective, and psychomotor (Billings & Halstead, 2009). The components of the course objective include: the learner or students, the behavior that the learner should be able to do, under what condition,
and to what extent. The Bloom’s Taxonomy action verbs are used to link the learning objectives to the student’s behavior.

According to Billings & Halstead (2009) cognitive learning could be measured by requiring the student to write an assignment, develop a portfolio, or take a test. Outcomes in the psychomotor domain are usually measured during clinical practice or simulation. The affective domain identifies the nursing student’s behavior levels, as they gain more experience and progressed through the program. The nursing student has met the outcome objective, when the highest level had been obtained.

The objectives for this syllabus were created using all the techniques laid out by Billings & Halstead (2009). Since this is a combination class two sets of objectives needed to created and then integrated. The objective was to not have the class feel like it was two classes lumped together, but rather a strategic blending of two often intertwined nursing subjects. The objectives were first proposed in a rough draft. This rough draft went through several changes. One change was the verification that all three domains were being covered. The objectives were further refined until all three members of the group agreed on them. The finalized objectives can be found in the appendix.

Knowles model of adult learning can be used to help the educator understand how age can affect learning (Billings & Halstead, 2009). Older students have multiple roles and responsibilities with job and family and because of these demands; they feel that they do not have time to waste. Adult-learning serves a purpose, a desire to solve a problem. Adult learners assume more responsibility for their learning and as a result are more actively involved in the learning process. Adult learners already have life experiences, which they can draw on. The adult learner responds to more choices and control. Taking this all in to consideration we
decided that we would allow the students to select a group and topic from a specified list, that they would research and present to the class. Not only would they learn the topic, they would develop their communication, collaboration and teaching skills. Bradshaw & Lowenstein (2007) noted the importance of using innovative teaching strategies. Nursing education has moved away from teacher centered teaching strategies to student centered strategies. Student centered strategies are more active forms of learning, that are more conducive to developing critical thinking

**Syllabus Elements**

According to Billings and Halstead (2009) the syllabi explains the course requirements, learning objectives, and the educator’s expectations. It would contain a description of the course, course objectives, course credit hours, class schedule, attendance policies, teaching strategies, outlines, due dates, late work policy, and the expected behaviors required to pass the course. It should also contain the faculty responsibilities, teaching methods, and evaluation methods. A statement that informs students with disabilities, that they need to notify faculty about required accommodations should also be include in the syllabi. The syllabus is the road map to the course and should be handed out on the first day of class.

The layout of the syllabus and the elements that were included were decided on by the group. The group chose to follow the recommendations of Billings & Halstead (2009) when developing the syllabus. The group also looked at several syllabi from various instructors to establish a general template. All members quickly agreed on this layout without any disagreement. The syllabus includes: course description, instructors name and contact information, course objectives, syllabus changes disclaimer, required course materials, grade determination, school grading system, attendance policy, academic integrity policy, student
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conduct rules, ethical and professional expectations, class schedule, description of assignments, and assignment grading rubric.

Evaluation

Gardner’s theory of multiple intelligence, defines intelligence as the ability to solve problems (Bradshaw & Lowenstein, 2007). Intelligence presents itself in seven forms, which are: linguistic, musical/rhythm, logical/mathematical, visual/spatial, bodily kinesthetic, interpersonal intelligence in regards to relationships with others and interpersonal intelligence related to a persons inner thought process. Some examples of linguistic strategies would be writing assignments. Creating a rhythmic pattern to help remember information would be an example of rhythm strategy. Dramatizing events, presentations, role-playing, or using video cameras could be considered visual/spatial and bodily kinesthetic strategies. Interpersonal intelligence in regards to relationships with others could be demonstrated by peer tutoring or group projects. Strategies such as journaling, independent assignments, or researching a topic of interest could utilize interpersonal intelligence, related to persons’ inner thought process. Not only could these strategies be used to help the students learn, they could be used to evaluate as well.

Evaluation of the curriculum, the instructor, and the student are all needed to insure the program’s effectiveness. Billings & Halstead (2009) reviewed ways the educator could determine if a student had achieved the learning out comes. Evaluation requires the educator to match the assessment strategy with the different domains of learning, which are cognitive, psychomotor, and affective domains (Billings & Halstead, 2009). Cognitive learning could be measured by requiring the student to write an assignment, develop a portfolio, or take a test.
Outcomes in the psychomotor domain are usually measured during clinical practice or simulation. The affective domain identifies the nursing student’s behavior levels, as they gain more experience and progress through the program. These behavior levels are: receiving, responding, valuing, organization of values, and value complex (Billings & Halstead, 2009). The nursing student would have met the outcomes and objectives, when the highest level had been obtained. Some of the strategies for measuring outcome identified by Billings & Halstead (2009) were portfolios, critiques, journals, essays, oral questioning, role-playing, service learning, audiotape, and videotape.

The evaluations for this course were created with the three domains and individual learning styles in mind. The learning style evaluation we used was the Grasha-Riechmann learning styles. The six learning styles are: competitive, independent, collaborative, dependent, avoidant and participant (Baykul et al., 2010). These learning styles and domains lead the group to decide on a mixture of exams, individual paper, and group presentation as methods to evaluate the student’s success in the course.

This was an area that caused some debate within the group. An idea of weekly tests was proposed but was decided that it would be too time consuming. The idea of both a group project and an individual paper were added early in the process. The group project went through several changes and it was eventually decided that in the interest of time the group project would be about a topic being discussed in class. This allowed the students to practice talking in front of a crowd and also made them experts on the material.

**Textbook Evaluation**

Textbook selection can be difficult; therefore several instruments have been developed to ease this task. The Texas Textbook Evaluation Tool (T-TET) was created to effectively evaluate
all textbooks, including nursing textbooks. The textbook evaluation for the community health book was completed utilizing the T-TET. This evaluation tool evaluates specific topics such as nursing specialty content, credibility, content quality, general content, format, and tangible issues (Sicola, & Chesley, 1999). The topics in each individual category are rated and scored and then a conversion scale revealed an overall rating of 2.9 percent. This is a high rating according to the T-TET. After the group discussion it was then decided to use the “Community and Public Health Nursing: Evidence for Practice” for the intended course. The text book chosen for the mental health courses was “Foundations of Psychiatric Mental Health Nursing: A Clinical Approach”, 6th edition, by Varcarolis and Halter. The group inquired to what book other nursing programs were using. Both the instructors and the nursing students at the University of Detroit nursing program recommended the book, stating the book adequately covered the material and presented in an understandable manner (W. Koos, personal communication, February 17, 2012). The group reviewed this book as well using the T-TET tool and the book also received a score of 2.9.

Using the T-TET scores and recommendations the group decided to go with the two books. These were easy to choose. They both had good scores and the recommendations sealed it for the group.

**Course Schedule**

The creation of a course schedule is important because it establishes the flow of the class. The schedule informs the student of what will be taught and when. It also lists the assignment due dates. An important point to consider when writing the schedule is that the syllabus is not a legal contract but rather a promise but to maintain harmony indicating that the schedule is tentative is a good practice (Immerwahr, 2010).
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The nurse educator must be knowledgeable and prepared to incorporate cultural competences into their curriculum in order to foster development of the nursing student’s cultural competences. According to Banardi, Bryant, & Colin (2009) a challenges is including more material in an already full curriculum. When creating the schedule it was quickly discovered that there was too much material to include it all. The group had to decide what was important. The chapters of the two textbooks were reviewed and after discussion some chapters were excluded. After the chapters were reduced down to a manageable level they were then placed within the schedule framework. Billings & Halstead, (2009) recommend educators limiting the concepts introduced in a single class to six or seven and to provide opportunities for rehearsal, in order to promote storage of information in the short term memory.

The schedule framework that was laid out consisted of four columns and 15 rows for each week of the semester. The four columns were labeled: week/date, topics, readings, and assignments due (See Appendix). After the dates and weeks were determined, the amount of material that needed to be covered each week was calculated. This was done more than once because at first the amount of material being covered was too much. Immerwahr (2010) discusses how it is important to consider the amount of time a student will be spending on the class both in class and outside of class. This is an important consideration because a realistic expectation which reflected the assigned credit hours needed to be identified. The last thing to be included was assignments and exams. These needed to be changed around as the scope of the group project changed and evolved.

Summary

This paper described the consideration and process for the syllabus development. This creative group work was lengthy and required good communication. The syllabus went through
many drafts until the final one was approved by all members. This framework was well thought out and used recent scholarly articles to establish the layout. All disagreements between members were quickly resolved. The syllabus establishes the framework for a mental health and community health class that could be established at the chosen college.
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References


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Appendix

Michigan Tech UNIVERSITY
COLLEGE OF ALLIED HEALTH SCIENCES
SCHOOL OF NURSING
BSN PROGRAM

NURS 4500: Mental health and Community Health Nursing Lecture Fall 2012

COURSE DESCRIPTION:
This course provides the theoretical base for identifying and meeting the mental health needs of the individual and the community health needs of the family and small groups within communities and examines the interrelationship between the psychological, social, and biological subsystems.

INSTRUCTORS:
Name: Nathon Kelley, Sandra Newsome, and Donna Ritchie
Campus Address: VFS 307
Office Phone: xxx-xxx-xxxxx
Home Phone: xx-xxx-xxxx
Cell Phone: xxx-xxx-xxxx
Mail: Preferred method-MT.U for course related questions otherwise xxxxxxxxxxx
Office hours: To be announced

COURSE OBJECTIVES:
1. Examine the role of the Mental Health Nurse
   • Compare mental health mood disorders, psychosis, and substance abuse.
   • Analyze therapeutic interventions associated with mood disorders, psychosis, and substance abuse.

2. Analyses psychological, teaching and nursing theories related to mental health and community health nursing

3. Analyses ethical and legal issues specific to mental health and public health
   • Mental health code and patient rights including confidentiality
   • Commitment proceedings
   • Duty to warn and Protective Services
   • Durable power of attorney and living wills

4. Examine the role of the Community Health Nurse and Public Health Nursing
   • Public Health Systems; past present and future
   • Community Mental Health
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- Health and global environment
- Environmental health
- Cultural diversity and values

5. Analyses the frameworks for health promotion, disease prevention and risk reduction
   - Epidemiology; science, definition, development and epidemiological models
   - Gathering evidence for nursing practice
   - Community and family assessment
   - Infectious diseases and disease prevention
   - Underserved populations
   - Violence and substance abuse
   - Community preparedness and disaster and terrorism

6. Examines the role of the community health nurse in palliative and end-of-life care.

7. Differentiate, interpret, and apply evidence-based research to the nursing practice in mental health and community nursing.

SYLLABUS CHANGES:

The instructor reserves the right to make changes as necessary to this syllabus. If changes are necessitated during the term of the course, the instructor will immediately notify students of such changes both by individual email communication and announcement in class providing notification and nature of change(s).

REQUIRED COURSE MATERIALS:


RECOMMEND BOOK:


GRADE DETERMINATION
EVALUATION:

Grading System— The grades awarded by the University are

<table>
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<tr>
<th>Letter Grade</th>
<th>Description</th>
<th>Grade Point</th>
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<tbody>
<tr>
<td>A</td>
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<td>4.0</td>
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<tr>
<td>AB</td>
<td>Very Good</td>
<td>3.5</td>
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<tr>
<td>B</td>
<td>Good</td>
<td>3.0</td>
</tr>
<tr>
<td>BC</td>
<td>Above Average</td>
<td>2.5</td>
</tr>
<tr>
<td>C</td>
<td>Average</td>
<td>2.0</td>
</tr>
<tr>
<td>CD</td>
<td>Below Average</td>
<td>1.5</td>
</tr>
<tr>
<td>D</td>
<td>Inferior</td>
<td>1.0</td>
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<tr>
<td>F</td>
<td>Failure</td>
<td>0</td>
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<tr>
<td>F*</td>
<td>Failure due to</td>
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<td></td>
<td>Academic Dishonesty</td>
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ATTENDANCE POLICY:

Students are expected to attend all classes, including recitation and laboratory sessions, beginning on the first day of regular instruction as stated in the University academic calendar. Absence from class may result in a lower grade and as a result may jeopardize one’s progress in the program.
Students having excused absences are permitted to make-up graded work. Whenever possible, students should contact the instructor prior to the absence and arrange a mutually acceptable make-up procedure. Otherwise, students should account for the absence at the first opportunity.

Students who are unable to notify instructors concerning their absence from class or who must notify several instructors on short notice should contact the Office of Student Affairs for assistance.

An absence isexcused under the following conditions: The instructor is assured that a student's absence from class was due to circumstances beyond the student's control. The student must provide verification of the special circumstance if the instructor requests it. Excuses are usually given in the following circumstances: illness, funeral of any relative or close friend, military duty, court appearance, and personal emergencies.

**ACADEMIC INTEGRITY POLICY 109.1:**

Academic integrity and honesty are central components of a student's education, and the ethical conduct maintained in an academic context will be taken eventually into a student's professional career. Academic integrity is essential in a community of scholars searching and learning to search for truth. Anything less than total commitment to integrity undermines the efforts of the entire academic community. Both students and faculty at Michigan Tech University are responsible for insuring the academic integrity of the university.

I. Definition of Academic Misconduct.

**Plagiarism:** Knowingly copying another's work or ideas and calling them one's own or not giving proper credit or citation. This includes but is not limited to reading or hearing another's work or ideas and using them as one's own; quoting, paraphrasing, or condensing another's work without giving proper credit; purchasing or receiving another's work and using, handling, or submitting it as one's own work.

**Cheating:** Intentional, unauthorized use of any study aids, equipment, or another's work during an academic exercise. This includes but is not limited to unauthorized use of notes, study aids, electronic or other equipment during an examination; copying or looking at another individual's examination; taking or passing information to another individual during an examination; taking an examination for another individual; allowing another individual to take one's examination; stealing examinations. Cheating also includes unauthorized collaboration. All graded academic exercises are expected to be performed on an individual basis unless otherwise stated by the instructor. An academic exercise may not be submitted by a student for course credit in more than one course without the permission of all instructors.

**STUDENT CONDUCT RULES:**

Discriminatory Harassment, Disruptive Student, Plagiarism, and other College/ University standardized policies are in the Nursing Student Handbook.
Discriminatory Harassment: Engaging in severe, pervasive and objectively offensive conduct that is unwelcome, discriminatory (on the basis of race, religion or cultural identity, disability, sexual orientation, gender or gender-identity, or ethnicity/national origin), and directed at an individual or a group of individuals so that it undermines the ability of the targeted individual(s) to access education equally. Discriminatory Harassment includes the creation of a hostile environment as well as attempts to create quid pro quo situations.

Disruptive/Disorderly Conduct: Causing a disturbance or disruption, including without limitation disturbing or disrupting the use or enjoyment of University premises or the surrounding community, research and teaching services.

ETHICAL AND PROFESSIONAL EXPECTATIONS:

- Trust and integrity are an important in the academic relationship; therefore students should do their own work.
- Collaboration is encouraged throughout the course; however the community health paper will be carried out individually.
- Assignments, assessment or other activities are to be completed by utilizing the directives. Assignments must be submitted by the due date. Assignments presented after the due date will not be accepted and the student will receive a zero for that assignment. If an extension is necessary, contact the instructor and negotiate an alternative due date.
- All papers will be submitted in class.
- All communication between student and instructor will be completed using MTU e-mail. You may also call the instructor to discuss a concern if an e-mail response is not sufficient.
- Students who become ill should also communicate their status to the instructor through the MTU e-mail so that accommodations can be made to facilitate progression in the course.

***The faculty for this course reserves the right to change, at any time, the schedule of assignments, required material to be completed and/or read, dates assignments are due, and other course student responsibilities with the issuance of a notice with the effected changes and date of implementation.
# NURS 4500 Tentative Schedule

<table>
<thead>
<tr>
<th>Week/Date</th>
<th>Topic</th>
<th>Reading</th>
<th>Assignments Due</th>
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</table>
| Week 1 9/4-9/09 | -Course Orientation  
                   -Introductions  
                   -Cultural implications for Psychiatric nursing                        | Syllabus Varcarolis & Halter Ch. 6                                      |                                       |
| Week 2 9/10-9/16| -Mood disorders including bipolar and depressive disorders  
                   -Assessment and treatment for them.                                  | Varcarolis & Halter Ch 3 pp. 63-68 Ch 13 & 14 & 24                      |                                       |
| Week 3 9/17-9/23| -Thought disorders (psychosis) and  
                   -Assessment and treatment for them.  
                   -Cognitive disorders                                                    | Varcarolis & Halter  
                   – Ch. 15 & 17 Ch 3 pp. 68-70.                                        | Group presentation  
                   Stress & ineffective coping  
                   Group presentation Anxiety and eating disorders                       |
| Week 4 9/24-9/30| -Stress & ineffective coping  
                   -Anxiety disorders, eating disorders, and personality disorders.  
                   -Assessment and treatment for them.                                    | Varcarolis & Halter Ch 3 pp. 61-63 Ch 11,12, 16, & 19                   | Group presentation  
                   Stress & ineffective coping  
                   Group presentation Substance abuse and treatment                      |
| Week 5 10/1-7   | -Substance abuse and treatment  
                   -Assessment and treatment for them.  
                   -Theories relevant to psychiatric nursing                              | Varcarolis & Halter Ch. 2 & 18 Ch 15, 16, & 17                          | Exam 1  
                   Covering weeks 5-9                                                      |
| Week 6 10/8-10/14| -Nursing process psychiatric setting  
                   -Therapeutic communication  
                   -Group dynamics  
                   -Educational strategies                                                 | Varcarolis & Halter Ch. 8, 9, 10, & 34                                  | Group presentation  
                   Group dynamics  
                   Group presentation Therapeutic communication                           |
| Week 7 10/15-21 | -Legal / Ethical concerns including:  
                   -Mental health code and patient rights & confidentiality  
                   -Commitment proceedings & Duty to Warn,  
                   -Aggressive behavior  
                   -Domestic Violence/Abuse  
                   -Protective services                                                    | State of Michigan Mental Health Code & pt rights. Varcarolis & Halter  
                   – Ch. 7 & 25                                                           | Group presentation  
                   Domestic violence/abuse and protective services                        |
| Week 8 10/22-28 | -Psychiatric nursing community setting  
                   -Durable power of attorney and living wills.  
                   -End of life issues                                                    | Varcarolis & Halter Ch. 5 & 32                                         | Group presentation  
                   End of life issues                                                      |
|                 | -Community and Public Health Nursing  
                   -Public Health Systems  
                   -Community Mental Health  
                   -Health and global environment                                           | Harkness & DeMarco Ch 1 pp. 3-18 Ch 2, 3, 20                            |                                       |
| Week 9 10/29-11/4| -Environmental Health  
                   -Planning for community changes  
                   -Cultural diversity and values                                           | Harkness & DeMarco Ch 18 pp. 353-372 & 376 Ch. 8 & 9                     | Exam 2  
                   Covering weeks 5-9                                                      |
| Week 10 11/5-11/11| -Frameworks for health promotion, disease prevention, and risk reduction  
                   -Epidemiology: The science of prevention                                | Harkness & DeMarco Ch. 4, 5, & 6                                       |                                       |
<table>
<thead>
<tr>
<th>Week 11</th>
<th>11/12-11/18</th>
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<tr>
<td>-Describing health conditions</td>
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<td>-Gathering Evidence for Practice</td>
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<td>-Community and family assessment</td>
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<tr>
<td>-Case Management and home health care</td>
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<tr>
<td>Harkness &amp; DeMarco Ch. 10, 11, &amp; 12</td>
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<tr>
<td>Community Paper Due</td>
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<tr>
<td>Thanksgiving recess 11/19-11/25</td>
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<tr>
<td>Have a wonderful Thanksgiving!!!</td>
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<tr>
<td>Week 12</td>
<td>11/26-12/2</td>
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<tr>
<td>-Risk of infectious diseases</td>
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<tr>
<td>-Emerging infectious diseases</td>
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<tr>
<td>-Violence and abuse</td>
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<tr>
<td>-Substance abuse</td>
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<tr>
<td>Harkness &amp; DeMarco Ch. 13, 14, 15, &amp; 16</td>
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<tr>
<td>Week 13</td>
<td>12/3-12/9</td>
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<tr>
<td>-Underserved populations</td>
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<tr>
<td>-Community Preparedness: Disaster and Terrorism</td>
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<tr>
<td>Harkness &amp; DeMarco Ch. 17 &amp; 19,</td>
<td></td>
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<tr>
<td>Week 14</td>
<td>12/10-12/16</td>
</tr>
<tr>
<td>-Faith oriented and health ministries in faith communities</td>
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<tr>
<td>-Community palliative and end of life care</td>
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<tr>
<td>Harkness &amp; DeMarco Ch. 22 &amp; 23</td>
<td></td>
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<tr>
<td>Exam 3 Covering weeks 10-14</td>
<td></td>
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<tr>
<td>Week 15 Finals</td>
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<tr>
<td>Wrap up &amp; evaluation</td>
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<tr>
<td>Respond to Evaluation Surveys</td>
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</table>
Assignment

Group Topic Presentation

You are now the instructor! In groups of 4 to 5 students you will be presenting a topic to the class. There are six topics to choose from and at the end of the third class you will sign up for your groups and topics. The presentations should be about 15 minutes in length and utilize multi-media options.

To prepare for the presentations read the associated chapters in your book. The goal is to summarize the reading using the nursing process of ADPIE. Presenters are expected to be able to answer questions posed to them from the audience. Please see the grading rubric below for more information.

Group Topic Presentation- GRADING RUBRIC

<table>
<thead>
<tr>
<th>Objective/Criteria</th>
<th>Below Expectations</th>
<th>Needs Improvement</th>
<th>Meets Expectations</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>Incomplete assessment with four or more key points missing. (0 points)</td>
<td>Assessment is missing more than two key points. (5 points)</td>
<td>Through assessment with only one or two key points missing. (12 points)</td>
<td>Complete assessment of the assigned topic. Audience is able to understand signs and symptoms or how the topic is understood in the realm of nursing. (15 points)</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>No nursing diagnosis listed. (0 points)</td>
<td>Two or less nursing diagnosis are listed but they are not shown how they relate to the topic. (5 points)</td>
<td>Two to three nursing diagnosis are discussed. How they relate to the topic is not totally clear. (12 points)</td>
<td>At least three nursing diagnosis are discussed in depth and how they relate to the topic. (15 points)</td>
</tr>
<tr>
<td>Planning</td>
<td>No goals identified or goals are not measurable. (0 points)</td>
<td>Two or more goals identified but two are more are not measurable. (5 points)</td>
<td>Three to four goals are identified. One goal is not measurable. (12 points)</td>
<td>At least four goals are identified that a nurse can assist a patient. All goals are measurable. (15 points)</td>
</tr>
<tr>
<td>Implementation</td>
<td>Identified interventions are not appropriate or not explained how they will assist the patient. (0 points)</td>
<td>Only one intervention is appropriate and fully explained. (5 points)</td>
<td>Three to four interventions identified. How the interventions will assist the patient is not fully explained. (12 points)</td>
<td>At least four interventions identified. The interventions are explained as to how they will assist the patient. (15 points)</td>
</tr>
<tr>
<td>Evaluation</td>
<td>Evaluation plan is missing or completely unable to assess the identified plan. (0 points)</td>
<td>Evaluation plan of poorly thought out with multiple key points missing. Assessment of plan is incomplete or</td>
<td>Evaluation is well written but not fully developed. One to two key points are missing. Ways to assess effectiveness of plan is not fully developed. (12 points)</td>
<td>A complete plan for evaluation is presented. Evaluation is appropriate and has ways to assess if changes are needed. (15 points)</td>
</tr>
<tr>
<td></td>
<td>APA Format, Spelling &amp; Grammar</td>
<td>Use of Multi-media</td>
<td>Overall Speaker Voice, Tone, and Audience Engagement</td>
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<td></td>
<td>11 or more misspelled words. (0 points)</td>
<td>1 form of multi-media used. Was hard to read or not engaging. Poor design. (3 points)</td>
<td>Very hard to hear or understand the speaker. Only one person from the group spoke. Unable to answer any questions. (0 points)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6 to 10 misspelled words and/or grammar errors, APA errors. (3 points)</td>
<td>1 form of multi-media used. Was adequately designed and easy to read. (8 points)</td>
<td>Hard to hear or understand the speaker for the majority of the presentation. Only one or two members spoke. Group unable to answer several questions. (4 points)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 to 5 misspelled words or grammar errors, APA errors. (4 points)</td>
<td>2 or more forms of multi-media used. Each one is well designed, easy to read, and engaging. (10 points)</td>
<td>Speaker’s voice or tone is not clear or to quite at times. One group member does not speak. Group unable to answer a question that was covered in the chapter. (8 points)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No misspelled words or grammar errors, no APA errors. (5 points)</td>
<td></td>
<td>Speaker’s voice and tone are clear and easy to understand. Volume is adequate and good eye contact throughout the presentation. All group members spoke. All questions were answered. (10 points)</td>
<td></td>
</tr>
</tbody>
</table>

| Total                   | /100                            |                    |                                                     |
**Assignment**

**Community Health Paper**: Students will visit an approved community agency and write a 3-5 page paper on the experience.

### GRADING RUBRIC

<table>
<thead>
<tr>
<th>Objective/Criteria</th>
<th>Below Expectations</th>
<th>Needs Improvement</th>
<th>Meets Expectations</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Introduction</strong></td>
<td>5) The introduction is below average. It is not clear as to what community agency was visited and/or what is discussed in the paper.</td>
<td>10) There is an average introduction of the community agency or what will be discussed in the paper is not introduced.</td>
<td>15) There is a good introduction of the community agency and what will be discussed in the paper is introduced.</td>
<td>20) There is an excellent introduction of the community agency and what will be discussed in the paper.</td>
</tr>
<tr>
<td><strong>B. Identifies Experience</strong></td>
<td>10) The discussion is below average or is not identified.</td>
<td>15) There is an average discussion on the student’s experience.</td>
<td>20) There is a good discussion on the student’s experience.</td>
<td>30) There is an excellent discussion on the student’s experience</td>
</tr>
<tr>
<td><strong>C. Describe community health nursing and the importance of public health systems</strong></td>
<td>10) There is a below average description of the community health nurse. The importance of public health systems is not clear.</td>
<td>15) There is an average description of the community health nurse or public health systems is not discussed</td>
<td>20) There is a good description of the community health nursing and the discussion of public health systems is discussed.</td>
<td>30) There is an excellent description of community health nursing and the importance of public health systems is discussed.</td>
</tr>
<tr>
<td><strong>D. Conclusion or Summary</strong></td>
<td>5) There is a below average conclusion or summary related to the key points of the paper. All new information is introduced.</td>
<td>6) There is an average conclusion or summary related to the key points in the paper</td>
<td>8) There is a good conclusion or summary related to key points of the paper.</td>
<td>10) There is an excellent conclusion or summary and no new information is introduced.</td>
</tr>
<tr>
<td><strong>E. APA Format, Spelling &amp; Grammar</strong></td>
<td>5) APA format is below average; &gt;10 errors in grammar or spelling</td>
<td>6) APA format is average; &lt;10 errors in grammar or spelling</td>
<td>8) APA format is good; &lt;5 errors in grammar or spelling</td>
<td>10) APA is excellent; No errors in grammar or spelling</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>