



**UNIVERSITY OF ALBERTA  
COLLABORATIVE BACCALAUREATE  
NURSING PROGRAM**  
Grande Prairie Regional College  
Grant MacEwan College  
Keyano College  
Red Deer College  
University of Alberta

**NURSING 1950**

**2006 – 2007 COURSE OUTLINE**

**Fall 2006**

**Course Dates: Oct 30 – Dec 15, 2006**

**Originally developed by the Clinical Experience Development Committee**

**Revised by the Learning Experiences Development Committee, April 2006**

<b>FACULTY</b>	<b>Office</b>	<b>Phone</b>	<b>Email</b>
Wendy McMillan RN, MN (Course Leader)	H202	539-2760	<a href="mailto:wcmillan@gprc.ab.ca">wcmillan@gprc.ab.ca</a>
Dot Dooley, BN, RN, IBCLC	H227	539-2891	<a href="mailto:ddooley@gprc.ab.ca">ddooley@gprc.ab.ca</a>
Joanne Ball, RN, BScN	H214	539-2892	<a href="mailto:jball@gprc.ab.ca">jball@gprc.ab.ca</a>
Esmie Calkins, RN, BScN	pending	pending	<a href="mailto:bcalkins@telus.net">bcalkins@telus.net</a>

©UNIVERSITY OF ALBERTA COLLABORATIVE BScN PROGRAM, 1999

All rights reserved. No part of this module may be reproduced in any form or by any means without the publisher's written permission.

**Approved: May 2006**

## Nursing 1950 Course Outline

### CALENDAR STATEMENT:

#### NURS 1950 Nursing Practice II

\*6 (fi 12) (second term, 0-3s-24c in 7 weeks). Practice includes health status assessment of clients and appropriate health promotion and disease prevention interventions. Practice occurs in settings where clients live or in community agencies (non-acute) where services to clients are offered. Prerequisites: NURS 1900 and 1940.

**COURSE HOURS:** LEC: 0 SEM: 21 LAB: 21 CLINICAL: 147

### COURSE DESCRIPTION:

This course will provide opportunities for students to participate in health promotion and primary (disease/injury) prevention activities with clients across the lifespan in selected community settings. Nursing practice will include selected assessment of individuals in the context of family and the assessment of their community, and opportunities to participate in activities of daily living with clients which will occur in various settings. Communication skills and establishing helping relationships will continue to be emphasized.

### COURSE OBJECTIVES:

#### LEVELS OF INDEPENDENCE

In evaluating objectives, the following levels of independence will be used:

**With assistance:** The student requires direction and information.

**With minimal assistance:** The student requires *occasional* direction and information.

**With guidance:** The student requires clarification, prompting and confirmation.

**With minimal guidance:** The students requires *occasional* clarification, prompting and confirmation.

**Independently:** The student works mostly on his or her own and seeks information, clarification and consultation as appropriate.

**Direction:** clinical tutor tells student what to do, about steps to take

**Information:** clinical tutor tells student specifics about a concept, topic

**Clarification:** clinical tutor, through questioning and feedback, assists the student to state their information in a different and clearer way, often with more details. Student asks questions to increase their understanding; questions asked demonstrate a sound knowledge base.

**Prompting:** clinical tutor provides student with a cue that answer is incomplete or incorrect and how to resolve the lack of information. A prompt is broader than a hint. Prompting is generally used to add breadth or depth.

**Confirmation:** clinical tutor provides positive feedback for correct information and direction provided by the student

**Consultation:** student provides clinical tutor with information and/or direction and asks specific questions about the information or direction which the instructor confirms.

**Occasional:** indicates that input is provided by clinical tutor now and then

**In addition to maintaining competency with previous course objectives, upon completion of Nursing 1950, the nursing student will be able to:**

## **PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE**

### **1. Practices within the legal and ethical standards established by the College and Association of Registered Nurses of Alberta and the Canadian Nurses Association, and according to legislated scope of practice, and provincial and federal legislation.**

#### **Independently:**

- demonstrates integrity
- demonstrates responsibility and accountability
- demonstrates respect for client's values, beliefs and rights

#### **With assistance:**

- demonstrates application of legal and ethical standards:
  - practices according to policies and procedures of host agencies and educational institution
  - uses knowledge of scope of practice and professional legislation and Code of Ethics
  - confidentiality
  - uses informed consent
  - prepares for clinical practice to provide safe, competent care
- demonstrates commitment to the values of the profession of nursing and support of professional development of colleagues

### **2. Engages in strategies for social and political action at a beginning level**

#### **With assistance:**

- differentiates own values / needs/ rights / obligations from values / needs / rights / obligations of others
- discusses formal and informal power structures in the context of social / political action in nursing situations
- identifies nursing issues requiring social and political action
  - identifies programs which have arisen from social / political action
- discusses the role of the individual nurse in social and political action
  - identifies role in existing programs
- discusses the role of professional nursing organizations in social and political action
  - protection of public
  - position statements
- describes the planning process for engaging in social and political action
  - funding sources (re: existing programs)
  - identifies strategies and resources for social and political action

### **3. Demonstrates skills and attitudes necessary for life-long learning**

**Independently**

- demonstrates personal responsibility for learning

**With assistance:**

- identifies strengths and limitations of own competence, seeking assistance when necessary
- demonstrates an openness and receptivity to change
  - seeks and is receptive to feedback
  - act on feedback
- assumes primary responsibility for attaining and maintaining competence based on nursing practice standards.

**KNOWLEDGE BASED PRACTICE****4. Applies a critical thinking approach to nursing****With assistance:**

- applies critical thinking strategies in developing sound clinical judgment in relation to health promotion and disease and injury prevention
- applies creative thinking, reflective thinking and insight for health promotion and disease and injury prevention for developing sound clinical judgment.

**5. Applies nursing knowledge, including knowledge from the arts, humanities, medical sciences, and social sciences into nursing practice.****With assistance:**

- uses selected areas of knowledge related to biological, psychological, socio-cultural and spiritual dimensions of the human response to stable variations in health
- uses selected areas of knowledge related to scope of practice and professional legislation in nursing practice.

**6. Demonstrates evidence based practice.****With assistance:**

- utilizes credible resources (research studies, experts, and others)
- examines research findings related to nursing situations
- describes the significance of research to practice (research studies, experts, and others)
- identifies nursing practice problems that require investigation.

**7. Applies nursing and other relevant models/theories in the professional practice of nursing.****With assistance:**

- discusses the use of nursing models / theories / metaparadigms
- identifies models / theories from other disciplines and their application into nursing
- explores the application of selected nursing models / theories into nursing practice.

**8. Demonstrates competence in health care informatics.****With assistance:**

- uses a variety of selected information technology and other technology to support all scholarly activities and clinical practice.

**PROVISION OF SERVICE TO PUBLIC****9. Applies concepts and principles of primary health care (accessibility of health services, use of appropriate technology, individual and community participation, increased health promotion and disease prevention, intersectoral collaboration).****With assistance:**

- applies principles of primary health care to with healthy individuals across the lifespan
- applies knowledge of health determinants in client situations
- applies selected health promotion activities with individuals:
  - develops professional skills needed for taking action (eg. teaching/learning)

**10. Demonstrates caring relationships in professional situations.****With assistance:**

- recognizes the uniqueness, worth and dignity of self and others
- demonstrates caring behaviors in interpersonal activities with clients, peers and others in the health care setting
- demonstrates ability to engage in caring relationships with clients in nursing practice (boundaries):
  - initiates, maintains and terminates professional relationships in a supportive manner
  - social vs. therapeutic

**11. Collaborates with clients, community agencies, community members, and members of other disciplines in a variety of settings.****With assistance:**

- encourages client participation, choice and control
- encourages colleague participation, choice and control
- develops cooperative relationships with colleagues, community members, community agencies and members of other disciplines
- interacts with clients with stable variations in health
- with assistance, engages in inter-professional interaction

**12. Demonstrates beginning leadership, management and administrative skills.****With assistance:**

- uses effective time management strategies in coordinating client care
- describes leadership and management roles and competencies
- uses decision-making processes
- effectively leads a small group
- performs an accurate appraisal of self and others
- effectively follows quality and risk management processes to enhance nursing practice
- identifies principles of delegation (right: task, circumstance, person, direction, supervision).

**13. Demonstrates the ability to deal with ambiguity and diversity.**

**With assistance:**

- identifies effects of ambiguity and diversity in all learning environments
- identifies ambiguity and diversity in selected nursing situations
- identifies own pattern of dealing with the effects of ambiguity and diversity
- selects appropriate strategies for dealing with the effects of ambiguity and diversity in selected nursing situations

**14. Demonstrates competence in clinical reasoning in relation to verbal and written communication, psychomotor skills, nursing process, priority setting, client education, in the promotion, restoration, rehabilitation and maintenance of health.****With assistance:**

- applies nursing process
- uses appropriate verbal communication skills
- uses appropriate written communication skills
- provides effective client education by applying:
  - principles of teaching and learning
- prioritizes nursing activities
- performs selected assessment skills in a competent manner

**Independently:**

- performs selected psychomotor skills in a competent manner – lab setting

**With guidance:**

- performs selected psychomotor skills in a competent manner – clinical setting

**CONTEXT BASED LEARNING****15. Demonstrates competence with context based learning.****With assistance:**

- describe the components of context based learning
  - self directed learning
  - group process
  - CBL process
- use the nursing process to plan nursing care for selected clients
  - selected assessment skills
  - problem identification
  - outcomes
  - interventions
  - evaluation
- effectively use group process to facilitate learning of the group
  - respect for the values and beliefs of others
  - responsibility and accountability for the learning of the group
  - group roles
  - caring behaviors
  - self directed learning
  - influencing factors
- effectively use critical thinking in the group
  - brainstorming
  - exploring (creativity, depth, breadth and relevancy)

- sources of information
- use communication skills to enhance the context based learning processes
  - sharing personal information
  - articulation
  - clarity
  - conciseness
  - relevancy
  - seeking and providing opinions, information and direction
  - receiving and giving feedback
- use writing skills to enhance the context based learning processes
  - legibility
  - appropriateness
  - clarity
  - conciseness
  - relevancy

## REQUIRED TEXTBOOKS

### From NS1900

Chabner, D.E. (2005). *Medical terminology: A short course* (4<sup>th</sup> ed). Philadelphia, PA: Elsevier Saunders.

Osis, M. (2002). *Dosage calculations in SI Units* (4<sup>th</sup> ed.). Toronto, ON: Elsevier Mosby.

## REQUIRED RESOURCES

1. Working Definitions (Posted Under Course Documents on Blackboard)
2. GPRC Integrated Lab Map (Posted Under Course Documents on Blackboard)
3. Graduate Competencies and Year End Outcomes (Posted Under Course Documents on Blackboard)
4. Other site-specific resources
5. Grade Descriptors
6. Evaluation of Nursing Practice (ENP)
7. All other Nursing 1900 texts
8. How to Communicate Through Blackboard (Provided at previous information sessions).

## OPTIONAL TEXTBOOKS

Lewis, S., Heitkemper, M. & Dirksen, S. (2003). *Medical surgical nursing: Assessment and management of clinical problems* (6<sup>th</sup> ed.). St Louis, MI: Mosby.

## TEXTBOOKS ON RESERVE (in LMS)

Arnold, E. & Boggs, K. (2003). *Interpersonal relationships: Professional communication skills for nurses* (4<sup>th</sup> ed.). St Louis, MI: Saunders

- Balzer Riley, J. (2004). *Communication in nursing (5<sup>th</sup> ed.)*. Toronto, ON: Mosby.
- Boyd, M. D., Graham, B. A., Gleit, C. J., & Whitman, N. I. (1998). *Health teaching in nursing practice: A professional model (3<sup>rd</sup> ed.)*. Stanford, CT: Appleton & Lange.
- Mansell, D. J. (2004). *Forging the future: A history of nursing in Canada*. Ann Arbor, MI: Thomas Press.
- Pender, N., Murdaugh, C., & Parsons, M. A. (2002). *Health promotion in nursing practice (4<sup>th</sup> ed.)*. Upper Saddle River, NJ: Prentice Hall.
- Vollman, A.R., Anderson, T. & McFarlane, J. (2004). *Canadian community as partner*. Philadelphia, PA: Lippincott Williams & Wilkins.
- Wright, L. M., & Leahey, M. (2000). *Nurses and families: A guide to family assessment and intervention (3<sup>rd</sup> ed.)*. Philadelphia, PA: F. A. Davis.
- Zilm, G. & Entwistle, C. (2002). *The smart way: An introduction to writing for nurses (2<sup>nd</sup> ed.)*. Toronto, ON: W.B. Saunders.

### **RECOMMENDED RESOURCES (site specific)**

Nursing Drug Handbook or program for Personal Data Assistant (for students in Long Term Care). Handbooks may be signed out from the Library for the four weeks.

### **REQUIRED EQUIPMENT**

Uniforms/Shoes  
Stethoscope  
Penlight

### **REQUIRED LEARNING EXPERIENCES**

**In order to pass NURS 1950, students must demonstrate safe ethical nursing practice, professional behavior, and complete the following experiences:**

1. During this course students will have a continuous experience in the community where clients live and/or in community agencies (non-acute) where services to clients are offered which will include nursing practice with individuals across the lifespan, in the context of family.
2. Participate in site selected lab activities (see Map of Theoretical Labs, Clinical Labs and Clinical Seminars).
3. Participate in health related activities of a community agency.

4. Complete a comprehensive health history on an individual.
5. Engage in a health promotion activity based on identified needs.
6. Examine the role of a registered nurse.
7. Using a selected nursing model, assess a client.
8. Perform selected nursing care (ie. ADL, hygiene).

### CLINICAL PRACTICE

AC1	(E. Calkins)	QEII (2 East)	Tues, Wed, Thurs	0700-1300
BC1	(J. Ball)	Grande Prairie Care Center	Tues, Wed, Thurs	0700-1300
CC1	(D. Dooley)	QEII (1 East)	Tues, Wed, Thurs	0700-1300

### LABS (SITE SPECIFIC)

#### Long Term Care Settings:

1. Functional Assessment: ADL (Activities of Daily Living) – Toileting, Dressing, Grooming and Safety.
2. Nutrition (feeding).
3. Comfort and hygiene (Bathing, backrubs, bed making, oral hygiene, Braden Scale, nurse safety (back care)
4. Medication administration lab (oral, topical, ophthalmic, rectal suppositories, inhalation, 5 Rights).
5. Assessment of the Diabetic client: Overview of diabetes mellitus. Blood glucose monitoring, teaching. Overview of peripheral circulation (assessment of feet, skin integrity, color, sensation, and movement, pedal pulses) (Fall)
6. Ambulation and transfers: aids to mobility (canes, walkers, lifts, wheelchairs), exercises and safety. Introduction to musculoskeletal assessment (assessment of ROM)

**NOTE: Scheduling for labs will be provided by your clinical instructor**

**Seminar**

<b>Section</b>	<b>Instructor</b>	<b>Room</b>	<b>Dates</b>	<b>Times</b>
A2	E.Calkin	QEII	Tues Wed Thurs	1300-1420 1300-1420 1300-1350
B2	J. Ball	GP CTR	Tues Wed Thurs	1300-1420 1300-1420 1300-1350
C2	D. Dooley	QEII	Tues Wed Thurs	1300-1420 1300-1420 1300-1350

***Seminars:***

- Environmental precautions: WHMIS (online learning component) and fire safety
- Planning Care (nursing care plan)
- Restraints, assessment of client safety, nurse safety (back care)
- Aphasia – physiotherapy, occupational therapy
- documentation
- Other – Topics determined by CBL Process
- Other – Topics critical to clinical placement setting

**Students are expected to attend labs, seminars, and clinical experiences according to the dates published in the academic calendar. Students are expected to be available for final evaluations during exam week.**

## REQUIRED EVALUATION

**Nursing practice must be evaluated** using the Evaluation of Nursing Practice (ENP) tool.

1. ENP plus 1 other assignment
  - To encourage the development of self reflective practice, it is recommended that client preparation, reflective practice, nursing care and learning plans be evaluated through discussion during the clinical day and post conference.

2. OSCE

You will be expected to perform Oral Medication Administration Skills according to criteria provided, at a competency level of 80%. You must attempt the OSCE when it is scheduled, and if needed will have two additional attempts to ensure your success. The skills to be tested and the criteria used for testing will be provided during Orientation Week. OSCE testing will take place in Clinical Practice on your first day of medication administration.

3. Dosage Calculations and Medical Terminology Quiz:

The ability to perform mathematical calculations when administering medications and performing other nursing measures is essential. You were required to purchase a pharmacology math programmed learning text and medical terminology in NS1900.

**Medical Terminology:** Students need to know medical terminology to effectively investigate and prepare materials for the CBL scenarios, and to learn the anatomy, physiology, and medical microbiology necessary to pursue professional nursing practice. You are required to complete chapters three, four and five (**3, 4, & 5**) in **Chabner 4<sup>th</sup> ed. (2005)**.

**Pharmacology Mathematical Calculations:** The ability to perform mathematical calculations when administering medications and perform other nursing measures is essential. You are required to complete chapters three and four (**3, 4, & 5**) in **Osis 4<sup>th</sup> ed. (2003)**..

**The exam for both medical terminology and math calculations will be a Med/Math calc quiz in Clinical Seminar on November 9<sup>th</sup> 1300-1500 in Room J228.**

**This will be similar in format, to the exam in NS1900, but in paper format, not on Blackboard. Mastery of 80% is required to receive a “Pass” on this test. A pass on the examination is required to receive credit for the course NS1950. You will have a maximum of three writings of the exam to achieve mastery. You will not be permitted to administer medications until the exam has been passed.**

**Note:** All material covered in NS1900 is testable for Medical Terminology and Pharmacology Mathematical Calculations.

4. Evaluation of student’s clinical performance:  
**A formative and written summative evaluation of Nursing Practice will be completed by the student and the tutor.**

This will be accomplished through observation assessment and evaluation of the student during nursing practice. Evaluations will be made by the tutor and may be supplemented with input from peers, the staff of an agency, and the client. Tutors are directed to refer to the current Evaluation of Nursing Practice (ENP) document from the Evaluation Strategies Committee.

**Evaluation Strategy Due Dates and Weighting:**

<b>Item</b>	<b>Due</b>	<b>Weighting</b>
<b>1. ENP</b>	<b>By appointment on last day of Clinical</b>	<b>75%</b>
<b>2. Patient Profile</b>	<b>Nov 30<sup>th</sup> at 0700</b>	<b>25%</b>

**PROGRESSION CRITERIA:**

- A. Students must complete theory and practice components of nursing courses to receive credit. **Students who have not received a pass in the clinical/laboratory portion of a nursing course are not given credit for the course and must repeat both the clinical and non-clinical portions of the course. The clinical component must be completed for credit to be granted.**
- B. A student who is absent more than two clinical days in one clinical nursing course may need to make up lost time at the tutor's discretion before being allowed to continue in the program. **Absences from the clinical site may result in the instructor's being unable to evaluate the student's clinical performance, resulting in a grade of F.**
- C. Whenever a student's clinical performance is considered marginal in a nursing course, the student's total academic and clinical performance in the program is reviewed at the end of each term and considered in determining continuation in the program.
- D. An instructor, in consultation with the Chair, may immediately deny assignment of a student: withdraw a student from; or vary terms, conditions or a site of a practicum/clinical placement if the instructor has reasonable grounds to believe that this is necessary in order to protect the Public Interest.

**ASSIGNMENT OF FINAL GRADE:**

*A grade will be assigned for each assignment using the marking criteria and then based on the grade descriptors (excellent, good, satisfactory, poor). Rationale will be given as to the assigned grade. Grading descriptors will be provided for each assignment.*

*Effective July 1, 2003 Grande Prairie Regional College uses the alpha grading system and the following approved letter codes for all programs and courses offered by the College.*

<i>Evaluation</i>	<i>Grade</i>	<i>4-point Equivalent</i>	<i>Percentage of Total Mark</i>	<i>Value</i>
<i>ENP</i>			<i>75%</i>	
<i>Patient Profile</i>			<i>25%</i>	
<i>Med/Math Calc</i>			<i>Pass/Fail</i>	
<i>OSCE (Meds)</i>			<i>Pass/Fail</i>	
				<b><i>TOTAL:</i></b>

***Total 4-Point Equivalent Values:***

***Translated to Final Grade:***

Grades for each assignment were translated into the 4-point equivalent, were then multiplied by the percentage of total mark for each assignment. The value of those percentages is added up to make a total. That total was converted back into the grade scale to receive your final grade. If you have any questions or concerns, please see your tutorial tutor. Your final exams can be viewed by setting up an appointment with your tutor.

**Grading Criteria for Nursing Courses:**

<b>Alpha Grade</b>	<b>4 Point Equivalent</b>	<b>Descriptor</b>
<b>A+</b>	<b>4.0</b>	<b>Excellent</b>
<b>A</b>	<b>4.0</b>	<b>Excellent</b>
<b>A-</b>	<b>3.7</b>	<b>First Class Standing*</b>
<b>B+</b>	<b>3.3</b>	<b>First Class Standing*</b>
<b>B</b>	<b>3.0</b>	<b>Good</b>
<b>B-</b>	<b>2.7</b>	<b>Good</b>
<b>C+</b>	<b>2.3</b>	<b>Satisfactory</b>
<b>C</b>	<b>2.0</b>	<b>Satisfactory</b>
<b>C-</b>	<b>1.7</b>	<b>Satisfactory</b>

**Passing Grades in Nursing Courses****Failing Grades in Nursing Courses**

<b>Alpha Grade</b>	<b>4 Point Equivalent</b>	<b>Descriptor</b>
<b>D+</b>	<b>1.3</b>	<b>Poor/Minimal Pass</b>
<b>D</b>	<b>1.0</b>	<b>Poor/Minimal Pass</b>
<b>F</b>	<b>0.0</b>	<b>Failure</b>

\* Very Good/Above Average is an alternate descriptor for First Class Standing.

*Students **may** receive a grade of D or D+ in an assignment or component of a course, but must have an overall grade of C- to achieve a passing grade in a nursing course.*

***\*\*Note: Refer to the 2006-07 College calendar p. 37 for further details regarding the grading policy and p. 122 and 123 regarding Progression Criteria in the Bachelor of Science in Nursing program.***

**SPECIALIZED SUPPORT AND DISABILITY SERVICES:**

Students who require special accommodations in this course due to disability affecting mobility, vision, hearing, learning, or mental or physical health are advised to discuss their needs with Student Services Special Needs Councilor Rosemary Kay.

**PLAGIARISM AND CHEATING:**

Please refer to your rights and responsibilities in the Grande Prairie Regional College 2006/2007 Calendar on pages 44-45.

**We expect honesty from our students.** This demands that the contribution of others be acknowledged (GPRC Calendar, 2006/2007). Penalties will be given according to the degree of the plagiarism or cheating. If you are unsure whether an action is plagiarism or not, please consult your tutor. Cheating refers to dishonest conduct such as speaking in an exam, bringing written material not authorized by the tutor, tampering with grades, or consciously aiding another student to cheat).

**LATE ASSIGNMENT POLICY:**

- All assignments and course evaluation strategies are required to be completed by the time and date specified in the course outline. **It is the responsibility of the student to confirm with the instructor that e-mail attachments have been received.**
- Extensions of the time specified for submission may be granted in case of illness or extenuating circumstances. **Extensions must be negotiated with the instructor prior to the required submission time and date.**
- **A penalty will be imposed for all late assignments and course evaluation strategies. One letter grade per class day will be deducted from the total value of the assignment for each class day the assignment is later.** For example, an assignment valued at B+ and handed in one day late will receive a grade of B.

**\*Note: All written assignments must be type written according to APA format.**

**Sick Policy:**

**If a student is sick, they are responsible to call the instructor at home or the unit that they are practicing on. If it is deemed that the student has been absent enough time that prevents him/her from completing the course objectives, and ability to be evaluated, then it will result in an incomplete for the course. (Absence of more than 2 days may jeopardize the instructor's ability to evaluate the student.)**

### **Policy Related to Clinical Absences**

Students are expected to attend classes and clinical experiences according to the dates published in the academic calendar. Students are expected to be available for final evaluations during exam week. Absence from any part of the clinical experience including labs, orientation, clinical, and seminars will jeopardize overall clinical performance. Such absences also compromise other students' learning experiences. Orientation is an essential component to ensure students are prepared to provide safe, competent care to clients and their families in the clinical setting.

Students will not be permitted to start clinical rotations without orientation to the specific unit(s) for that rotation.

If, for reasons beyond the student's control, he or she is unable to attend orientation (ie death in family, severe illness) an alternative with the clinical tutor must be negotiated. Students must develop a learning plan to facilitate how they are going to prepare for clinical and account for the labs/orientation that they have missed. This learning plan must be completed prior to the first clinical day.

If the student is unable to attend orientation for any other reason the following policy is in place. The student will not be allowed to practice in the clinical setting until orientation is complete.

1. It is the student's responsibility to arrange to be oriented to the unit(s) by an instructor at their own expense. The hourly rate for an instructor has been set at \$40.00/hr.
2. The student will be denied a clinical experience if orientation cannot be completed prior to the start of clinical.

### **PROFESSIONAL DRESS:**

Students are expected to abide by the dress code of the particular agency where their clinical experience is taking place. Refer to your student handbook for policy. All students will wear a Grande Prairie Regional College picture ID and a Peace Country Health Region Student ID as required.

**NS 1950****Reflective Journal Guidelines**

Reflective journaling is an excellent tool to analyze personal and professional growth in the clinical setting. It allows students an opportunity to identify essential clinical events and relate values, beliefs, & behavior to future practice. *In this clinical placement, you will be expected to submit two journal entries, reflecting on your clinical experience(s).*

**Due dates:**

**Journal #1 ~ Nov 16<sup>th</sup> at 0700**

**Journal #2 ~ Dec 7<sup>th</sup> at 0700**

It is expected that students will incorporate and build on previous knowledge from NS1900 theory.

APA format required and a maximum of 2 pages (500 words) **excluding title and reference pages** for each journal.

## Reflecting on My Practice

Reflective practice notes:

You may find it helpful to use this worksheet as a format for a journal, or for occasional use as you reflect on a case that went particularly well or a situation that was difficult for you. The analysis can help you identify strengths or areas to work on in your practice.

### **Description of a situation**

Date? What happened? (To ensure confidentiality, initials description should be used.)

### **Analysis of situation**

What went well? What did you find difficult? What surprised or puzzled you? How did you feel? What would you do differently in the future? What do you need to know to assure a better outcome?

### **Identification of strength or area to work on in your practice.**

**What area do I need to work on in my practice?**

## NS 1950 Client Profile Guidelines

### THE NURSING PROCESS

#### Assessment

- Demographic patient data: Initials, age, gender
- List current medical diagnoses and relevant past history,
- Explanation of pathophysiology (clear and concise) of **one** of the client's major medical diagnoses. What is happening physiologically in the body? What signs and symptoms pertaining to this condition is your client experiencing?
- Medications: What medications are prescribed for this client? Briefly explain why this client is taking the medication.

#### Nursing Diagnoses

- Identify **one** nursing diagnoses related to the major condition identified above.
- The actual or potential problem
- See NANDA

#### Planning

- Goal
  - Client centred goals are specific, measurable, time limited, and mutually set with the client
  - What is the expected outcome? What is it you wish to accomplish? List **one** goal.
  -
- Objectives (Expected Outcomes)
  - A specific measurable change that is expected to occur in response to nursing care.
  - An objective criterion for goal achievement.
  - The steps you will take to achieve the goal. Choose **two nursing interventions or treatment** that you will perform and the **rationale** for the intervention.
  - See NIC

## **Implementation**

- Carrying out your plan.
- Nurses provide direct or indirect nursing interventions to the client
- This is the care that you will provide to enhance client outcomes.
- You initiate and complete actions or interventions necessary for achieving the overall goal and the expected outcomes

## **Evaluation**

- This phase determines the effectiveness of nursing care
- Allows the nurse to determine if nursing interventions are successful in improving the client's condition
- Did it work? If so, explain why. If not, what would you change in your interventions to achieve the goal?

**APA format required. Page limit: 5 pages (1250 words) excluding title and reference pages.**

***As a Guide, Refer to Potter and Perry (2006). Chapter 12: The Nursing Process.***

**NS 1950 Client Profile Grading Guide**

<b>A</b>	Includes all elements in the assignment guidelines. Provides a concise, clear description of the client and past history. Describes pathophysiology of one major diagnosis and integrates symptoms experienced by client. Explains with rationale the indications for medications. Describes nursing diagnosis, plan (goals and objectives), implementation, and evaluation in a comprehensive manner. APA format requires no revision.
<b>B</b>	Includes most of the elements in the assignment guidelines. Past history and description of the client is concise but less clear. Pathophysiology is explained with some integration of client's symptoms. Rationale for medications is provided and mostly accurate. Describes nursing diagnosis, plan (goals and objectives), implementation, and evaluation clear but not comprehensive. APA format requires minimal revision.
<b>C</b>	Some of the key components of the assignment guidelines are missing or addressed in a superficial manner. Pathophysiology is explained but shows little integration of the client's symptoms. Rationale for medications is provided and somewhat accurate. Describes nursing diagnosis, plan (goals and objectives), implementation, and evaluation clearly but is superficial in content. APA format requires more than minimal revision.
<b>D</b>	Information is superficially addressed. Integration of some relevant symptoms with pathophysiology is misinterpreted, incomplete, or superficial. Rationale for medications is provided and not accurate. Description of nursing diagnosis, plan (goals and objectives), implementation, and evaluation is not clear/incomplete. APA format is inconsistent and requires major revision.
<b>F</b>	Most of the key elements of the assignment are missing. Writing indicates an inability to carry out the assignment directions. APA format is not followed. Assignment not handed in.

## NS 1950 Continuing Care / LTC Placement 2006

In this clinical placement you will be responsible for the care of one resident on 1 East/2 East/GP Care Center for the full 6 weeks. This includes all ADL's (bedmaking, hygiene, dressing, mobilizing, feeding, etc.), implementing and building upon communication theory, and learning to work as a team.

Your experience will also include: two days with the bath team, two observation days with the medication nurse, and one observation during a patient conference with an interdisciplinary or a multidisciplinary team (not necessarily your resident), depending on the clinical area.

See course objectives.

### First Year RN Students may do:

Bed baths  
Tub baths  
Tooth brushing and mouth care  
Denture care  
Shaving  
Assist with 2 person transfers  
Feeding  
Vital signs ~ TPR & BP  
Toileting: including bedpans & commodes  
Care of hearing aids  
Weights  
Medications  
Suppositories  
Glucometers  
Practice Charting  
Simple Dressings

### Students may not do:

Enemas  
Disempaction  
Tube feeds  
Electronic Charting  
Complex Dressings  
Maintenance of IV's  
Operate patient lifts alone (may consider allowing 2 students in last week)

### **Clinical Expectations for Continuing Care**

#### **Dress Code:**

- Professional uniforms with name tag (see Course Outline)

**Illness/Sickness:**

- Please call the instructor the evening prior to clinical (before 2200) or the unit (after 2200) and leave a message with the staff on the floor. 1East 538-7374.2 East 538-7102, GP Care Center 532-3525.

**Coffee Breaks/Meal Breaks:**

- 8 hour shift - 30 minute coffee break  
- 30 minute meal break

**Smoking and Visitor Policy:**

- Remember this is the resident's home, therefore family and friends can visit at any time.
- There is a smoking room available for residents and visitors only.
- Students must use the designated smoking areas outside the facility.

**Medication Administration:**

- 1<sup>st</sup> year nursing students will begin to administer medications.

**Patient Assignments:**

- Students will be assigned to one resident for this clinical experience; you will receive this information prior to the start of your 1<sup>st</sup> clinical day. If your resident is changed during this clinical rotation, you will be notified by the instructor.

**Resident Research:**

- It is an expectation in this program that students will come prepared for clinical; therefore, client research must be done prior to clinical. You will be expected to answer appropriate questions for your resident based on the following criteria:
  - Diagnosis
  - History
  - ADL's – eg. mobility,
  - Any specific nursing interventions
  - Use of appropriate care plans (when you plan to do the bath, etc.)
  - Review skills that are necessary for client care.
  - **If a student is unprepared for clinical, they will be asked to leave clinical for that shift and be marked as absent.**
  - Please ensure that you let staff know when you have a chart, where you are taking the chart, and **never** leave the unit with the chart.

**Organization Plans/Care Plans:**

- All students need to have an organizational tool that helps them plan their day to the best of their ability. Your instructor will have some samples of organizational tools, or some people plan their own organizational tools. Some areas to include are appropriate assessments, times you plan on performing physical care, health history questions.

**Charting, physical assessments, skills:**

- Remember all skills done for the **first time MUST** be seen by the instructor; it is your responsibility to inform the instructor.

- Practice charting will be done this clinical experience.
- It is your responsibility to inform your instructor if you are uncomfortable with any skill or assessments. It is your responsibility to review the policy and procedure manuals prior to performing any psychomotor skill.
- There will be times when the instructor will not be available to watch you. Check with your instructor for further directions, to see if you can perform it independently or with a RN. The student is to arrange times with the instructor in advance of any psychomotor skills that are necessary throughout the shift.
- It is your responsibility to keep the instructor informed of your client's assessments and any changes, also inform the RN/LPN or team members.
- When you leave for breaks, ensure that the team knows you're leaving and your resident's status.
- If you're unsure if you need to report something, it's always better to say something. There's never a stupid question, and it's best to be safe than sorry.
- You need to follow GPRC and facility policies and procedures.

**Incident Reports/injuries:**

- If an injury or error occurs to either the resident or student, the student must notify the instructor immediately and together we will follow hospital policy.

Post clinical/seminar – room TBA

**You need to be prepared for report at 0700; we recommend that you're on the floor by 0645.**

**Generic Grade Descriptors for ENP  
(June 20, 2006)**

**LEVEL OF INDEPENDENCE**

In evaluating (clinical performance) objectives, the following level of independence will be used:

**With assistance:** The student requires direction and information.

**With minimal assistance:** The student requires *occasional* direction and information.

**With guidance:** The student requires clarification, prompting and confirmation.

**With minimal guidance:** The student requires *occasional* clarification, prompting and confirmation.

**Independently:** The student works mostly on his or her own and seeks information, clarification, and consultation as appropriate.

**Definition of terms:**

**Direction:** tutor tells student what to do, about steps to take

**Information:** tutor tells student specifics about a concept, topic

**Clarification:** tutor, through questioning and feedback, assists the student to state their information in a different and clear way, often with more details. Student asks questions to increase their understanding; questions asked demonstrate a sound knowledge base

**Prompting:** tutor provides student with a cue that answer is incomplete or incorrect and how to resolve the lack of information. A prompt is broader than a hint. Prompting is generally used to add breadth or depth.

**Confirmation:** tutor provides positive feedback for correct information and direction provided by the student

**Consultation:** student provides tutor with information and/or direction and asks specific questions about the information or direction which the instructor confirms.

**Occasional:** indicates that input is provided by tutor now and then

	<b>Excellent/Exemplary</b>	<b>Very Good</b>	<b>Good/Satisfactory</b>	<b>Minimal Pass</b>	<b>Fail</b>
<b>General Description</b>	Clearly & consistently enthusiastic & committed to learning & nursing. Care is characterized by comprehensive, detailed & relevant assessments, individualized, in-depth, evidence-based care, & anticipation of future client needs. Highly competent at the level	Enthusiastic & committed to learning & nursing. Care is thorough & competent, with minimal guidance Almost always meets & occasionally, exceeds course objectives.	Keen interest in learning & nursing. Requires guidance to meet the objectives at a satisfactory level. This guidance decreases during the course.  Identifies personal learning needs & abilities although may require	Interest in learning & nursing is inconsistent over the course. Requires on-going direction, prompting & information to meet the course objectives. Care is generally superficial but is not considered unsafe.	Lacks commitment, initiative/enthusiasm regarding learning & nursing.  Fails to identify personal learning needs or strategies.  Demonstrates unsafe nursing practice, does not meet course objectives.

	<p>expected for that year in the program, consistently meets, &amp; at times exceeds, the course objectives</p>		<p>assistance to generate strategies to meet course objectives.</p>		
<p><b>Professional Responsibility and Ethical Practice</b></p>	<p>Consistently maintains an exemplary standard of personal &amp; professional ethics: confidentiality, integrity, honesty. Meets legal standards.</p> <p>Consistently demonstrates initiative, visionary in examining personal learning needs &amp; abilities, as well as client needs (asks what if &amp; why not). Seeks &amp; recognizes opportunities for growth in self &amp; others including clients.</p>	<p>With minimal guidance, maintains personal &amp; professional ethics: confidentiality, integrity, honesty; meets legal standards.</p> <p>&amp; incorporates this knowledge in practice.</p> <p>Engages in reflective thinking regarding own personal learning needs &amp; abilities, as well as those of client. With minimal guidance seeks &amp; recognizes opportunities for growth in self &amp; others including clients,</p>	<p>With guidance, maintains standards of personal &amp; professional ethics: confidentiality, integrity, honesty. Aware of standards &amp; legislation &amp; needs guidance to apply this knowledge to clinical situations or to the recognize relevance to own developing professional practice.</p> <p>Requires guidance to recognize opportunities for growth in self &amp; others including clients.</p>	<p>With minimal assistance, maintains standards of personal &amp; professional ethics: confidentiality, integrity, honesty. Aware of standards &amp; legislation &amp; needs minimal assistance to apply this knowledge to clinical situations or to recognize relevance to own developing professional practice</p> <p>Demonstrates minimal initiative re: personal learning needs &amp; abilities, &amp; in recognizing/anticipating client needs. Generally does not seek or recognize opportunities for growth in self or others, including clients.</p>	<p>Fails to maintain standards of personal &amp;/or professional ethics: confidentiality, integrity, and/or honesty. Needs on-going assistance to practice in accordance with legislaton.</p> <p>Lacks insight into own learning needs &amp; abilities, and/or client needs. Fails to recognize opportunities for growth in self and/or others including clients</p>
<p><b>Knowledge Based Practice</b></p>	<p>Consistently demonstrates exceptional level of knowledge related to course objectives. Knowledge is integrated into nursing practice through exemplary use of the nursing process.</p>	<p>Demonstrates strong level of knowledge related to course objectives, demonstrates transference of components of similar contexts from previous learning</p>	<p>Identifies areas for knowledge development with guidance to ensure that all relevant factors &amp; areas of knowledge are considered. Depth of preparation for</p>	<p>Demonstrates a weak level of knowledge related to course objectives. Demonstrates very little contextual awareness &amp; flexibility in adapting to new situations. Has a superficial level of knowledge &amp; generally is unable to</p>	<p>Demonstrates a very poor level of knowledge related to course objectives. Demonstrates minimal levels of contextual awareness &amp; flexibility when required to adapt to new situations.</p>

	<p><b>Demonstrates outstanding level of contextual awareness &amp; flexibility. .</b></p> <p>Care is characterized by comprehensive &amp; relevant assessments, individualized, in-depth, evidence-based care, &amp; anticipation of future client needs. Competent beyond the level expected for the year in the program.</p>	<p>experiences such as theory courses &amp; prior clinical courses, as well as flexibility in adapting to a variety of situations.</p> <p>With minimal guidance, incorporates evidence-based findings.</p> <p>Knowledge is integrated into nursing practice through effective use of the nursing process. Consistently meets course objectives &amp; achieves some course objectives above the level expected for the year in the program</p>	<p>clinical practice may be somewhat superficial but does not compromise client safety</p> <p>Level of knowledge related to course objectives is adequate. With guidance, incorporates similar components from previous learning experiences. May be anxious or lacking confidence when required to adapt to new situations.</p> <p>With guidance, incorporates evidence-based findings..</p>	<p>integrate knowledge in planning care without assistance. Care is characterized by superficial assessments that lack some detail. Furthermore, care may lack an individualized approach, depth, or careful /thoughtful use of evidence/resources. Requires assistance to determine content areas needed to ensure complete or in-depth approaches to client care. May need assistance to ensure that all important factors are considered.</p>	<p>Level of knowledge is weak with inadequate/inaccurate integration in applying the nursing process.</p> <p>Care is characterized by weak, superficial assessments, &amp; lacks individualized approach, depth, evidence/resources. The care provided is below the level expected for the year in the program, &amp; consistently fails to meets the course objectives</p>
<p><b>Provision of Service to Public</b></p>	<p>Consistently anticipates &amp; plans for actual &amp; potential alterations in the needs of clients, including client families. Demonstrates competence &amp; confidence in using the skills appropriate to the specific year of the program, &amp; responds to situations of ambiguity &amp; diversity with confidence in own ability to apply knowledge &amp; sound</p>	<p>With minimal guidance, anticipates &amp; plans for actual &amp; potential alterations in the needs of clients, including client families. With minimal guidance, demonstrates competence &amp; is generally confident in using the skills appropriate to the specific year of the program.</p>	<p>With guidance, care is characterized by relevant assessments; individualized, evidence-based care; &amp; anticipation of immediate, &amp; possibly some future client needs.</p> <p>Competent with the skills for the year in the program, meets the course objectives at an acceptable &amp;</p>	<p>Generally fails to anticipate or plan for actual or potential alterations in the needs of clients, including client families. Demonstrates minimally acceptable competence &amp;/or confidence in using the skills appropriate to the specific year of the program. Responds to situations of ambiguity &amp; diversity with lack of confidence in own ability to apply knowledge or sound clinical judgment.</p>	<p>Consistently fails to anticipate or plan for alterations in the needs of clients or client families. Demonstrates a lack of competence in using the skills appropriate to the specific year of the program, Responds to situations of ambiguity &amp; diversity with difficulty, lack of competence to apply knowledge, or exercising sound clinical judgment.</p>

	<p><b>clinical judgment.</b></p> <p>Consistently demonstrates caring &amp; supportive behaviours, &amp; fosters professional relationships through verbal &amp; non-verbal communication that is consistently exceeds expectations for this point in the program.</p>	<p>With minimal guidance, responds to situations of ambiguity &amp; diversity with confidence in own ability to apply knowledge &amp; sound clinical judgment. Demonstrates caring &amp; supportive behaviours, &amp; fosters professional relationships through verbal &amp; non-verbal communication that exceeds expectations for this point in the program.</p>	<p>safe level.</p> <p>With guidance, anticipates &amp; plans for actual &amp; potential alterations in the needs of clients, including client families. With guidance, responds to situations of ambiguity &amp; diversity. With guidance and support, uses sound clinical judgment, demonstrates caring &amp; supportive behaviours, &amp; fosters professional relationships through verbal &amp; non-verbal communication</p>	<p>Fails to consistently demonstrate caring or supportive behaviours, &amp; may have difficulty fostering professional relationships at an acceptable level, through verbal &amp;/or non-verbal communication.</p>	<p>Fails to demonstrate caring or supportive behaviours, &amp; fails to foster professional relationships. These behaviours are not at an acceptable level for the point in the program.</p>
CBL	<p>Consistently &amp; independently demonstrates outstanding performance in all areas/components of CBL, including group process, self-direction, critical thinking, communication &amp; where applicable, writing to enhance &amp; support the learning that takes place in the group</p>	<p>With minimal guidance, demonstrates a high standard in most areas/components of CBL, including group process, self-direction, critical thinking, communication &amp; where applicable, writing to enhance &amp; support the learning that takes place in the group</p>	<p>With guidance, demonstrates an acceptable level of perform in most areas/components of CBL, including group process, self-direction, critical thinking, communication &amp; where applicable, writing to enhance &amp; support the learning that takes place in the group</p>	<p>With assistance, demonstrates an acceptable level in most areas/components of CBL, including group process, self-direction, critical thinking, communication &amp; where applicable, writing to enhance &amp; support the learning that takes place in the group</p>	<p>Fails to achieve an acceptable standard in most areas/components of CBL, including group process, self-direction in learning, critical thinking, communication &amp; where applicable, writing to enhance &amp; support the learning that takes place in the group</p>

Nursing 1950  
**Evaluation of Nursing Practice**

University of Alberta Collaborative BScN Program: N1950 ENP April 2006

4: Excellent    3: Very Good    2: Good, Average, Satisfactory    1: Minimal Pass    0: Fail

	4	3	2	1	0
<p><b>PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE</b></p> <p><b>1. Practices within the legal and ethical standards established by the College and Association of Registered Nurses of Alberta and the Canadian Nurses Association, and according to legislated scope of practice, and provincial and federal legislation.</b></p> <p><b>Independently:</b></p> <ul style="list-style-type: none"> <li>▪ demonstrates integrity</li> <li>▪ demonstrates responsibility and accountability</li> <li>▪ demonstrates respect for client's values, beliefs and rights</li> </ul> <p><b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ demonstrates application of legal and ethical standards: <ul style="list-style-type: none"> <li>○ practices according to policies and procedures of host agencies and educational institution</li> <li>○ uses knowledge of scope of practice and professional legislation and Code of Ethics</li> <li>○ confidentiality</li> <li>○ uses informed consent</li> <li>○ prepares for clinical practice to provide safe, competent care</li> </ul> </li> <li>▪ demonstrates commitment to the values of the profession of nursing and support of professional development of colleagues</li> </ul> <p><b>2. Engages in strategies for social and political action at a beginning level</b></p> <p><b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ differentiates own values / needs/ rights / obligations from values / needs / rights / obligations of others</li> <li>▪ discusses formal and informal power structures in the context of social / political action in nursing situations</li> <li>▪ identifies nursing issues requiring social and political action <ul style="list-style-type: none"> <li>○ identifies programs which have arisen from social / political action</li> </ul> </li> <li>▪ discusses the role of the individual nurse in social and political action <ul style="list-style-type: none"> <li>○ identifies role in existing programs</li> </ul> </li> <li>▪ discusses the role of professional nursing organizations in social and political action <ul style="list-style-type: none"> <li>○ protection of public</li> <li>○ position statements</li> </ul> </li> <li>▪ describes the planning process for engaging in social and political action <ul style="list-style-type: none"> <li>○ funding sources (re: existing programs)</li> <li>○ identifies strategies and resources for social and political action</li> </ul> </li> </ul> <p><b>3. Demonstrates skills and attitudes necessary for life-long learning</b></p> <p><b>Independently</b></p> <ul style="list-style-type: none"> <li>▪ demonstrates personal responsibility for learning</li> </ul> <p><b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>▪ demonstrates an openness and receptivity to change</li> </ul>					

	4	3	2	1	0
<ul style="list-style-type: none"> <li>○ seeks and is receptive to feedback</li> <li>○ act on feedback</li> <li>▪ assumes primary responsibility for attaining and maintaining competence based on nursing practice standards.</li> </ul>					
<p><b>KNOWLEDGE BASED PRACTICE</b></p> <p><b>4. Applies a critical thinking approach to nursing</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ applies critical thinking strategies in in developing sound clinical judgment in relation to health promotion and disease and injury prevention</li> <li>▪ applies creative thinking, reflective thinking and insight for health promotion and disease and injury prevention for developing sound clinical judgment.</li> </ul> <p><b>5. Applies nursing knowledge, including knowledge from the arts, humanities, medical sciences, and social sciences into nursing practice.</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ uses selected areas of knowledge related to biological, psychological, socio-cultural and spiritual dimensions of the human response to stable variations in health</li> <li>▪ uses selected areas of knowledge related to scope of practice and professional legislation in nursing practice.</li> </ul> <p><b>6. Demonstrates evidence based practice.</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ utilizes credible resources (research studies, experts, and others)</li> <li>▪ examines research findings related to nursing situations</li> <li>▪ describes the significance of research to practice (research studies, experts, and others)</li> <li>▪ identifies nursing practice problems that require investigation.</li> </ul> <p><b>7. Applies nursing and other relevant models/theories in the professional practice of nursing.</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ discusses the use of nursing models / theories / metaparadigms</li> <li>▪ identifies models / theories from other disciplines and their application into nursing</li> <li>▪ explores the application of selected nursing models / theories into nursing practice.</li> </ul> <p><b>8. Demonstrates competence in health care informatics.</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ uses a variety of selected information technology and other technology to support all scholarly activities and clinical practice.</li> </ul>					
<p><b>PROVISION OF SERVICE TO PUBLIC</b></p> <p><b>9. Applies concepts and principles of primary health care (accessibility of health services, use of appropriate technology, individual and community participation, increased health promotion and disease prevention, intersectoral collaboration).</b>  <b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ applies principles of primary health care to with healthy individuals across the</li> </ul>					

	4	3	2	1	0
lifespan <ul style="list-style-type: none"> <li>▪ applies knowledge of health determinants in client situations</li> <li>▪ applies selected health promotion activities with individuals:                             <ul style="list-style-type: none"> <li>○ develops professional skills needed for taking action (eg. teaching/learning)</li> </ul> </li> </ul>					
<b>10. Demonstrates caring relationships in professional situations.</b> <b>With assistance:</b> <ul style="list-style-type: none"> <li>▪ recognizes the uniqueness, worth and dignity of self and others</li> <li>▪ demonstrates caring behaviors in interpersonal activities with clients, peers and others in the health care setting</li> <li>▪ demonstrates ability to engage in caring relationships with clients in nursing practice (boundaries):                             <ul style="list-style-type: none"> <li>○ initiates, maintains and terminates professional relationships in a supportive manner</li> <li>○ social vs. therapeutic</li> </ul> </li> </ul>					
<b>11. Collaborates with clients, community agencies, community members, and members of other disciplines in a variety of settings.</b> <b>With assistance:</b> <ul style="list-style-type: none"> <li>▪ encourages client participation, choice and control</li> <li>▪ encourages colleague participation, choice and control</li> <li>▪ develops cooperative relationships with colleagues, community members, community agencies and members of other disciplines</li> <li>▪ interacts with clients with stable variations in health</li> <li>▪ with assistance, engages in inter-professional interaction</li> </ul>					
<b>12. Demonstrates beginning leadership, management and administrative skills.</b> <b>With assistance:</b> <ul style="list-style-type: none"> <li>▪ uses effective time management strategies in coordinating client care</li> <li>▪ describes leadership and management roles and competencies</li> <li>▪ uses decision-making processes</li> <li>▪ effectively leads a small group</li> <li>▪ performs an accurate appraisal of self and others</li> <li>▪ effectively follows quality and risk management processes to enhance nursing practice</li> <li>▪ identifies principles of delegation (right: task, circumstance, person, direction, supervision).</li> </ul>					
<b>13. Demonstrates the ability to deal with ambiguity and diversity.</b> <b>With assistance:</b> <ul style="list-style-type: none"> <li>▪ identifies effects of ambiguity and diversity in all learning environments</li> <li>▪ identifies ambiguity and diversity in selected nursing situations</li> <li>▪ identifies own pattern of dealing with the effects of ambiguity and diversity</li> <li>▪ selects appropriate strategies for dealing with the effects of ambiguity and diversity in selected nursing situations</li> </ul>					
<b>14. Demonstrates competence in clinical reasoning in relation to verbal and written communication, psychomotor skills, nursing process, priority setting, client education, in the promotion, restoration, rehabilitation and maintenance of health.</b> <b>With assistance:</b>					

	4	3	2	1	0
<ul style="list-style-type: none"> <li>▪ applies nursing process</li> <li>▪ uses appropriate verbal communication skills</li> <li>▪ uses appropriate written communication skills</li> <li>▪ provides effective client education by applying:                             <ul style="list-style-type: none"> <li>○ principles of teaching and learning</li> </ul> </li> <li>▪ prioritizes nursing activities</li> <li>▪ performs selected assessment skills in a competent manner</li> </ul> <p><b>Independently:</b></p> <ul style="list-style-type: none"> <li>▪ performs selected psychomotor skills in a competent manner – lab setting</li> </ul> <p><b>With guidance:</b></p> <ul style="list-style-type: none"> <li>▪ performs selected psychomotor skills in a competent manner – clinical setting</li> </ul>					
<p><b>CONTEXT BASED LEARNING</b></p> <p><b>15. Demonstrates competence with context based learning.</b></p> <p><b>With assistance:</b></p> <ul style="list-style-type: none"> <li>▪ describe the components of context based learning                             <ul style="list-style-type: none"> <li>○ self directed learning</li> <li>○ group process</li> <li>○ CBL process</li> </ul> </li> <li>▪ use the nursing process to plan nursing care for selected clients                             <ul style="list-style-type: none"> <li>○ selected assessment skills</li> <li>○ problem identification</li> <li>○ outcomes</li> <li>○ interventions</li> <li>○ evaluation</li> </ul> </li> <li>▪ effectively use group process to facilitate learning of the group                             <ul style="list-style-type: none"> <li>○ respect for the values and beliefs of others</li> <li>○ responsibility and accountability for the learning of the group</li> <li>○ group roles</li> <li>○ caring behaviors</li> <li>○ self directed learning</li> <li>○ influencing factors</li> </ul> </li> <li>▪ effectively use critical thinking in the group                             <ul style="list-style-type: none"> <li>○ brainstorming</li> <li>○ exploring (creativity, depth, breadth and relevancy)</li> <li>○ sources of information</li> </ul> </li> <li>▪ use communication skills to enhance the context based learning processes                             <ul style="list-style-type: none"> <li>○ sharing personal information</li> <li>○ articulation</li> <li>○ clarity</li> <li>○ conciseness</li> <li>○ relevancy</li> <li>○ seeking and providing opinions, information and direction</li> <li>○ receiving and giving feedback</li> </ul> </li> <li>▪ use writing skills to enhance the context based learning processes                             <ul style="list-style-type: none"> <li>○ legibility</li> <li>○ appropriateness</li> <li>○ clarity</li> <li>○ conciseness</li> <li>○ relevancy</li> </ul> </li> </ul>					

**Instructor Comments:**

**Student Comments:**

**Date:** \_\_\_\_\_

**Instructor Signature:** \_\_\_\_\_ **Student Signature:** \_\_\_\_\_

- The student's signature indicates that the student has read the evaluation.