



UNIVERSITY OF ALBERTA COLLABORATIVE BACCALAUREATE NURSING PROGRAM

Grande Prairie Regional College

Keyano College

Red Deer College

University of Alberta

NURSING 2950

Winter 2010

COURSE OUTLINE

Dates: January 5- February 19, 2010 **Group: A**

Tutors: Dot Dooley BN, RN, MN – Course Leader
Office: H 227; Phone: 780-539-2891 email: ddooley@gprc.ab.ca

Karen Crosby-Rolston BA, BN, RN
Office: H214; Phone: 780-539-2019 email: kcrosby-rolston@gprc.ab.ca

Dates: February 22-April 16, 2010 **Group: B**

Tutors: Asha Parmar BA, RN, BScN
Office: H212; Phone: 780-539-2892 email: aparmar@gprc.ab.ca

TBA

Dot Dooley BN, RN, MN – Course Leader
Office: H 227; Phone: 780-539-2891 email: ddooley@gprc.ab.ca

Originally developed by the Clinical Experience Development Committee

Revised by the Learning Experiences Development Committee, April 2007

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Approved: May 2009

Nursing 2950 Course Outline

CALENDAR STATEMENT:

NURS 295 Nursing Practice IV *7 (fi 14) (either term, 3-25c-3 in 7 weeks).

Practice focuses on restoration, rehabilitation and support (including health promotion and disease prevention) of clients with chronic and less acute variances in health across the life span. Practice occurs in homes or in community-based settings. Prerequisites: NURS 140, 150, 190, 191, 194, 195 and MMI 133. Pre- or corequisite: NURS 290.

COURSE HOURS: LEC: 0 SEM: 21 CLINICAL: 175 LAB: 21

Clinical: Refer to Clinical Schedule.

Seminars:

Group A: January/February 2010; **Fridays 0830-1120;** **Room: J131;** **B3**

Group B: February/March/April 2010; **Fridays 0830-1120;** **Room: H225;** **A3**

COURSE DESCRIPTION:

This course will provide opportunities for students to continue to participate in health promotion and primary prevention activities while focusing on restoration, rehabilitation and support. Nursing practice will include health assessment and intervention with child-bearing families. In addition, opportunity to participate with support and/or prevention programs/projects for clients of any age in relation to chronic and less acute variances in health may occur. The student will experience nursing practice over a continuous block of time in community-based settings and in homes and some acute care experiences related to child-bearing families.

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 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.

Direction: Clinical tutor tells the student what to do, about what steps to take.

Information: Clinical tutor tells the student specifics about a concept or 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. The

student asks questions to increase their understanding; questions asked demonstrate a sound knowledge base.

Prompting: Clinical tutor provides the 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: The 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 NURS 2950, the nursing student will be able to:

PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE

1. Practise 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:

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

With minimal assistance:

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

2. Engage in strategies for social and political action at a beginning level.

With minimal assistance:

- differentiate own values/needs/rights/obligations from values/needs/rights/obligations of others
- discuss formal and informal power structures in the context of social/political action in nursing situations:
 - *recognize vulnerable clients/families*
- identify nursing issues requiring social and political action:
 - identify programs which have arisen from social/political action
- discuss the role of the individual nurse in social/political action:
 - identify role in existing programs
 - *empower clients*

- *discuss client responsibilities*
 - *promote client autonomy and collaboration*
- discuss the role of professional nursing organizations in social and political action:
 - protection of public
 - position statements
- describe the planning process for engaging in social and political action:
 - *identify information to be provided to client/family*
 - identify funding sources (re: existing programs)
 - *identify the funding process*
 - *discuss change theory*
 - *identify existing programs that address client/family needs*
- identify strategies and resources for social and political action.

3. Demonstrate skills and attitudes necessary for life-long learning.

Independently:

- demonstrate personal responsibility for learning
- demonstrate an attitude of inquiry to enhance own learning related to nursing practice

With guidance:

- demonstrate the ability to develop informal (verbal) focused learning goals based on personal and/or client needs

With minimal assistance:

- identify strengths and limitations of own competence, seeking assistance when necessary
- demonstrate an openness and receptivity to change:
 - seek and be receptive to feedback
 - act on feedback
- assume primary responsibility for attaining and maintaining competence based on nursing practice standards.

KNOWLEDGE-BASED PRACTICE

4. Apply a critical thinking approach to nursing.

With minimal assistance:

- apply critical thinking strategies in developing sound clinical judgment in relation to restoration, rehabilitation and support
- apply creative thinking, reflective thinking and insight for restoration, rehabilitation and support for developing sound clinical judgment.

5. Apply nursing knowledge, including knowledge from the arts, humanities, medical sciences, and social sciences into nursing practice.

With minimal assistance:

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

6. Demonstrate evidence-based practice.

With minimal assistance:

- utilize credible resources (research studies, experts, and others)
- examine research findings related to nursing situations

- describe the significance of research to practice (research studies, experts, and others)
- identify nursing practice problems that require investigation.

7. Apply nursing and other relevant models/theories in the professional practice of nursing.

With minimal assistance:

- explain the use of nursing models/theories/metaparadigms
- explore application of selected models/theories from other disciplines and their application into nursing
- explore the application of selected nursing models/theories into nursing practice.

8. Demonstrate competence in healthcare informatics.

With minimal assistance:

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

PROVISION OF SERVICE TO PUBLIC

9. Apply 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, inter-sectoral collaboration).

With minimal assistance:

- apply concepts and principles of primary health care with clients experiencing chronic and less acute variances in health
- apply knowledge of health determinants in client situations
- apply selected health promotion activities with individuals and families:
 - develop professional skills needed for taking action (e.g., teaching/learning)
 - *create supportive environments.*

10. Demonstrate caring relationships in professional situations.

With minimal assistance:

- *recognize how caring behaviours can influence health and healing*
- recognize the uniqueness, worth and dignity of self and others
- demonstrate caring behaviours in interpersonal activities with clients, peers and others in the health care setting
- demonstrate ability to engage in caring relationships with clients in nursing practice:
 - initiate, maintain and terminate professional relationships in a supportive manner
 - social vs. therapeutic
 - *recognize situations requiring client advocacy.*

11. Collaborate with clients, community agencies, community members, and members of other disciplines in a variety of settings.

With minimal assistance:

- promote client participation, choice and control
- promote colleague participation, choice and control
- develop partnerships with community members, community agencies, colleagues and members of other disciplines
- interact with clients with chronic and less acute variations in health
- engage in inter-professional interaction.

12. Demonstrate beginning leadership, management and administrative skills.

With minimal assistance:

- use effective time management strategies in co-ordinating client care
- describe leadership and management roles and competencies
- use decision-making processes
- effectively lead a small group
- perform an accurate appraisal of self and others
- effectively follow quality and risk management processes to enhance nursing practice
- identify principles of supervision (right: task, circumstance, person, direction).

13. Demonstrate the ability to deal with ambiguity and diversity.

With minimal assistance:

- *anticipate the need of clients*
- deal with the effects of ambiguity and diversity in all learning environments
- identify ambiguity and diversity in selected nursing situations
- identify own pattern of dealing with the effects of ambiguity and diversity
- provide support to clients experiencing effects of ambiguity and diversity in times of transition
- select appropriate strategies for dealing with the effects of ambiguity and diversity in selected nursing situations.

14. Demonstrate 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 minimal assistance:

- apply nursing process
- use appropriate verbal communication skills:
 - *using appropriate lines of communication*
 - *communicating and reporting relevant information in a timely manner*
- use appropriate written communication skills:
 - *documenting relevant information accurately and in a timely manner*
- provide effective client education by:
 - applying principles of teaching and learning
 - *identifying needed referrals*
- prioritize nursing activities
- perform selected assessment skills in a competent manner

Independently:

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

With guidance:

- perform selected psychomotor skills in a competent manner – clinical setting.

CONTEXT-BASED LEARNING

15. Demonstrate competency with the application of the elements of context-based learning to clinical experience seminars and pre-/post-conferences.

With guidance:

- effectively use self-directed learning
- effectively use critical thinking skills to facilitate learning of the group

- 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 behaviours
 - communication skills (verbal or written)
 - factors which influence the group.

REQUIRED RESOURCES

1. Working Definitions
2. Map of Theoretical Labs, Clinical Labs and Clinical Seminars
3. Graduate Competencies and Year-end Outcomes
4. Grade Descriptors
5. Other site-specific resources

RECOMMENDED RESOURCES (site specific)

Ackley, B., & Ladwig, G. (2008). *Nursing diagnosis handbook: An evidence-based guide to planning care* (8th ed.). St. Louis: Mosby.

Osis, M. (2003). *Dosage Calculations in SI Units*. (4th ed.). St. Louis: Mosby.

Ricci, S.S., & Kyle, T. (2009). *Maternity and pediatric nursing*. Philadelphia: Lippincott Williams & Wilkins.

Potter, P. A. & Perry, A. G. (2006). *Canadian fundamentals of nursing* (3rd ed.). St. Louis: Mosby.

Wilson, S. F. & Giddens, J. F. (2005). *Health assessment for nursing practice*. St. Louis: Mosby.

REQUIRED LEARNING EXPERIENCES

In order to pass NURS 2950, students must demonstrate safe ethical nursing practice, professional behaviour, and complete the following experiences. Students are expected to implement previously learned nursing skills.

1. During this course, students will have a continuous experience in community-based practice and in homes and some acute care settings. Students will participate in nursing care of child-bearing families, health promotion programs, prevention programs, birthing and post-partum experiences.
2. Participate in site-selected labs (see 'Map of Theoretical Labs, Clinical Labs and Clinical Seminars').
3. Participate in a client experience during birthing, post-partum. If a live birthing experience is not available, a birthing film or simulation will be utilized.
4. Participate in health promotion activities in a public health setting.
5. Observe and/or participate during a Well Baby Clinic.
6. Utilize the CFAM/CFIM model.

7. Perform an assessment on a newborn.
8. Collaborate with clients, family, nurse, community members and members of other disciplines.

SUGGESTED OPTIONAL LEARNING EXPERIENCES (site specific)

1. Observe and/or participate during the immediate post-partum home visit.
2. Participate in a prenatal, labour and delivery, and post-partum follow-through experience.
3. Participate in a prenatal class.
4. Participate in community support activities organized by the health unit, if available.
5. Participate in immunization programs.
6. Observe and/or participate in health team meetings.

REQUIRED EVALUATION

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

1. ENP plus 1 other assignment (exceptions at discretion of Dean/Chair).
 - 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. **Students are required to maintain competence in math calculations and therefore must pass a written math calculation exam early in the course. A passing grade is 90%. Students will be allowed 2 opportunities to rewrite if they are not successful in the first exam. Failure to achieve a passing grade on the math calculation exam or either of the two rewrites will result in the student being asked to withdraw from the course.**
3. 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 document from the Evaluation Strategies Committee.

In order to pass NURS 2950, students must demonstrate safe, ethical nursing practice; professional behavior; complete every one of the required activities to follow [reflective journals, research assignment, clinical practice, and Evaluation of Nursing Practice (ENP)], and acquire a passing grade in the Evaluation of Nursing Practice (ENP).



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.

Unsafe clinical practice is behavior that places the client or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the client or family at risk for emotional or psychological harm. Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk.

Scanlan, J. M., Care, W. D., & Gessler, S. (2001). Dealing with the unsafe student in clinical practice. *Nurse Educator*, 26 (11), 23-27

**DEPARTMENT OF NURSING EDUCATION
GRANDE PRAIRIE REGIONAL COLLEGE & PEACE COUNTRY HEALTH REGION
EXPECTATIONS FOR STUDENT CLINICAL EXPERIENCES**

The input of the nurse in the Clinical Agency is valued and welcome. GPRC and PCHR can benefit when the nurse:

1. Role models professional nursing behaviours including attitudes, techniques, awareness and adherence to agency policies.
2. Maintains an interest and openness to teaching and learning with faculty and students.
3. Alerts faculty and students to additional learning experiences.
4. Promotes learning opportunities for students as observers in addition to hands on practice.
5. Assists students when faculty is not available if appropriate for level of student and if responsibilities permit.
6. Gives constructive feedback about performance of faculty and student when asked. Receives constructive feedback about self.
7. Shares in open dialogue with faculty, concerns or difficulties related to student assignments.

As a Faculty Member in the Clinical Agency, the Nursing Instructors are expected to:

1. Role model professional nursing behaviour including attitudes, techniques and adherence to agency policies.
2. Maintain an interest and openness to teaching and learning with staff and students.
3. Clearly indicate the skills the students are allowed to practice. Ideally supervise students doing any skills or procedures for the first time.
4. Share in open dialogue with nursing staff, concerns and difficulties in the management of student assignments.
5. Assume responsibility for student evaluation and delegate supervision of students appropriately, after consultation with staff.
6. When asked by the unit manager, give constructive feedback about performance of staff. Receive constructive feedback about self.
7. Discuss student individual learning needs and assignments with nursing staff as appropriate.

Students in the Clinical Agency are expected to:

1. Demonstrate professional behaviour including attitudes, techniques and adherence to agency policies.
2. Maintain an interest and openness to teaching and learning with staff and faculty.
3. Prepare for clinical assignment.
4. Complete assignment in collaboration with instructor, assigned nurse and other health care professionals.
5. Document in a timely manner.
6. Communicate with instructor and assigned nurse regarding status of the client(s) and include a concise verbal or taped report when leaving.
7. When requested, provide constructive feedback about performance of faculty and staff. Receive constructive feedback about self.
8. Demonstrate an appropriate level of independence.

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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.

Grading Criteria for Nursing Courses:

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

Passing Grades in Nursing Courses

Failing Grades in Nursing Courses

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

*Very Good 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. If you receive a grade of “F” in any of the ENP criteria it constitutes a “clinical failure” on the ENP, as the student has then shown unsafe, unprofessional, or unethical nursing practice.

Grades for each assignment are translated into the 4-point equivalent, and then multiplied by the percentage of total mark for each assignment. The values of those percentages are 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.

****Note: Refer to the 2009-2010 College calendar for further details regarding the grading policy and-Progression Criteria in the Bachelor of Science in Nursing program.**

Summary of the Evaluation Criteria of NS 2950

<i>Evaluation</i>	<i>Grade</i>	<i>4-point Equivalent</i>	<i>Percentage of Total Mark</i>	<i>Value</i>
<i>ENP will be a combination of input from postpartum, pediatrics & public health</i>			<i>70%</i>	
<i>Research assignment</i>			<i>30%</i>	
<i>Critical Incident Journal</i>			<i>Complete/ Incomplete</i>	
				<i>Total:</i>

Total 4-Point Equivalent Values:

Final Grade:

PLAGIARISM AND CHEATING: Please refer to your rights and responsibilities in the Grande Prairie Regional College 2009-2010 Calendar on **Academic Dishonesty**.

LATE ASSIGNMENT POLICY: Please refer to the Department of Nursing Student Handbook for the **Late Assignment Policy**

1. Reflective Journal

DUE DATE: Group A: January 29th, 2010; Group B: March 26th, 2010,

For the purposes of this assignment, students will be required to choose ONE INCIDENT that occurred in any of the NS 2950 experiences. It is not intended to be a commentary of a clinical shift, but rather an experience that allows you to “gain an understanding of how cognitive and personal experiences have contributed” to your own knowledge, experience and clinical practice.

This journal will be used as part of your ENP and will not be given a formal grade.

It is an expectation that this journal will be **2-4 pages type written**. If you chose to relate your experiences to the literature, it must be submitted in APA format. Please maintain patient/staff confidentiality when writing your journal.

Here are some questions that may help you to write your journal:

1. What happened? What were the facts?-be objective
2. What was my role in the incident?
3. What are the feelings and senses you had surrounding the incident?
4. What did you do?
5. How did you feel about your choices? Why?
6. What was the setting that you were in?
7. Were there any extenuating circumstances that contributed to the incident?
8. What were the important elements that surrounded the incident? Were you part of the problem, part of the solution or a by-stander in the incident?
9. What preceded and what followed the incident?
10. What did I learn from the incident?
11. What would I teach my peers if they were in a similar situation?



Ibarreta, G.I., & McLeod, L. (2004). Thinking aloud on paper: An experience in journal writing. *Journal of Nursing Education*, 43(3), 134-137.

Patton, J., & Woods, S. (1997). Enhancing the clinical practicum experience through journal writing. *Journal of Nursing Education*, 36 (5), 238-240.

2. Research Inquiry Assignment (30%)

The purpose of this assignment is to introduce students to beginning concepts of nursing research and evidence based practice nursing through exploring the evaluation phase of the nursing process. Students will select an area of interest that pertains to their nursing practice in this clinical practicum. The student then develops a research question, hypothesis and a method to obtain the data that is related to the specific area of interest. The student **MUST** identify whether their method of inquiry is qualitative, quantitative or both.

Students must interpret the data they have collected in their study and compare the results to current research on the same topic they have chosen. A variety of research articles are expected to be used. **Students must have instructor approve Research Question and Questionnaire [Tool] prior to the start of their project.**

Students are expected to save their Research Data/Information and Powerpoint presentation onto a portable memory stick (USB drive or flashdrive).

Each student will have **20 minutes** to give an overview of their study, hypothesis, data collection, data analysis, comparison to the literature and relevance to nursing practice in a **Powerpoint format.**

You will also design a **Peer Evaluation Tool** that you will pass into your instructor on the day of your presentation. You will have your Peers evaluate your presentation using this tool.

This assignment will be worth **30%** of your mark. It also counts as **16 clinical hours**. It is a project of your design and you must submit an **outline to your instructor 1 week prior to the due date.**

Assignments must be all passed in on the same day.

Students will sign up and present on one of the two scheduled seminar days.

Outline/Research Question/Research Questionnaire (Tool)

Group A: January 29th

Group B: March 26th

Due Date for Assignment

Group A: February 5th

Group B: April 9th

Presentations + Peer Evaluation Tool:

Group A: February 5th & 12th

Group B: April 9th & 16th

4. **Evaluation of Nursing Practice (ENP)** (70%)

Formative evaluations will occur throughout clinical and a written summative evaluation of Nursing Practice will be completed by the student and the instructor at the end of each clinical area. See attached form.

This will be accomplished through observation, assessment, and evaluation of the student during clinical practice. Evaluations will be made by the instructor and may be supplemented with input from peers, the staff of an agency, and the client. **For the purposes of NS 2950, the ENP grade will be an AVERAGE of your performance in all mat/child areas of practice including pediatrics, NICU and the public health settings.**

Student Evaluations:

Group #1 : February 19th

Group #2: April 16th

Students MUST pass the ENP in order to pass the course. If you receive a grade of “F” in any of the ENP criteria it constitutes a “clinical failure” on the ENP, as the student has then shown unsafe, unprofessional, or unethical nursing practice.

Students must complete an ENP at the end of each clinical area (postpartum, public health.) Your performance on Labor and Delivery, NICU and Paediatrics will also be reflected in your ENP. Your ENP grade will be assigned at the end of the rotation in consultation with both NS 2950 instructors.

