

**University of Alberta
Collaborative Baccalaureate Nursing Program**

**Grande Prairie Regional College
Grant MacEwan College
Keyano College
Red Deer College
University of Alberta**

NURSING 3850
Clinical Practice for Post-RNs
Course Outline
Winter 2002

Course Leader/Clinical Tutor

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NS 3850

Calendar Statement: *7(0-3s-28 in 7 weeks) or (0-1.5s-15 in 13 weeks)

Nursing practice focuses on health promotion and disease prevention of clients across the lifespan. Practice occurs in homes or community-based settings.

Course Hours:

Lecture/Seminar: 21 hours

Lab/Clinical: 195 hours

Course description:

This clinical course will provide opportunities for students to develop skills in health assessment, intervention, and communication with clients*, families* and groups* experiencing various levels of health. Community-based nursing is addressed as a key component of primary health care. The interaction between the family and the environment will be emphasized. The student will utilize the nursing process as a framework for health promotion and primary prevention activities in the community. The student will experience nursing practice over a continuous block of time in community-based settings.

*Refers to definitions in the document “Working definitions for Core Concept Map”, May 1, 1998.

Course Objectives:

Upon completion of NS 3850, the nursing student will be able to:

1. Analyze nursing knowledge as well as knowledge from other disciplines (research, models, and theories) related to biological, psychosocial and spiritual factors in nursing practice with clients experiencing various levels of health.
1. Demonstrate application of legal and ethical standards in a variety of nursing practice settings by: demonstrating support of colleagues, using a decision making process, incorporating client’s values, beliefs, and rights withing the social mandate and the role of the professional association.
1. Demonstrate professional behaviours in nursing practice (respect, communication, responsibility, and self-awareness).
1. Demonstrate openness and receptivity to change and an attitude of inquiry in nursing practice.
1. Demonstrate primary responsibility for attaining competence in nursing practice.

1. Apply concepts related to health promotion, primary, secondary, and tertiary prevention, with clients experiencing various levels of health by:
 - demonstrating safe nursing practice
 - coordination care using clinical judgement, critical thinking, and innovation with increasing independence.
 - demonstrating competence in mobilizing power structures in community settings.
 - demonstrating beginning competence in dealing with diversity and ambiguity.

1. Demonstrate competence in ability to interact with and develop collaborative partnerships with clients, community members, nurses, and members of other disciplines, displaying valuing, respecting autonomy, and commitment to caring.

1. Demonstrate competence in a variety of selected skills in the community setting: communication and informatics, assessment (physical, psychosocial, family, social, spiritual), psychomotor, and the facilitating of learning (teaching), planning, intervention, evaluation.

Important Dates to Note:

- January 11, 2002 Last day to change registrations dropping winter semester courses. Students dropping winter courses after this date will be assessed full feesf or those courses. Winter fees are due. Last day for new registrants to opt out of the Student Health Plan.
- January 25, 2002 Last day for payment of winter fees without penalty.
- March 8, 2002 Last day for withdrawing with permission from, or changing registrations staus from audit to credit for winter semester and full year courses. Withdrawing from a course after this date will result in a failing grade.

Required Textbooks:

There is no specific textbook required for this course. Students are expected to use a variety of textbooks, research and journal articles to support their practice.

REQUIRED LEARNING EXPERIENCES AND EVALUATION:

In order to pass NS 3850 students must demonstrate safe, ethical nursing practice, professional behavior and complete the following experiences and assignments.

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|-----------|--|------------|
| 1. | Direct/Indirect Clinical Observation (DICO) of Nursing Practice | 40% |
| 2. | Learning Plan | 20% |
| 3. | Reflective Journal and Field Notes | 20% |
| 4. | Presentation | 20% |

Nursing Practice

The clinical time allocation for this course is 15 hours per week x 13 weeks for a total of 195 hours. In consultation with the clinical preceptor/agency contact person each student will decide how the 195 hours will be fulfilled in the 13 week period. Some time each week should be devoted to time to develop course assignments. Practice is enhanced with adequate time to reflect upon the learning that is occurring in practice. In addition there will be 7 three hour clinical seminars (every other week). The clinical setting will serve as the context in which to achieve the course objectives and carry out the course learning experiences.

Each student will be matched to a community-based agency that has agreed to offer a 13 week clinical placement that will allow for practice in the area of health promotion. The student will receive an orientation to the agency and will be paired with an experienced health professional who will assist you in arranging your learning experience within the agency. The clinical preceptor will assist you with consultation, guidance and professional support. The faculty tutor will guide your clinical learning experiences through clinical seminars and individual consultation and will determine the marks for various course assignments.

Nursing practice and performance in this course will be evaluated by means of the following:

- 1. Direct and Indirect Clinical Observation (DICO) 40%**

The DICO will be accomplished through observation of the student's nursing practice in the assigned agency. Observation will be made by the course tutor and will be supplemented with input from peers, the staff of an agency and the client/clients. Since each student's clinical practice will vary, the type of nursing practice actually observed will vary as well. In some instances, the tutor will observe student interaction with individuals and/or families (ie: home visits) and in other situations, group/staff interactions may be observed.

The student (and preceptor) and instructor will complete a formative and final written summative evaluation.

Student practice performance is evaluated according to the criteria outlined in the

Direct/Indirect Clinical Observation Grading Guide.

- All categories on the DICO are weighted equally (knowledge, helping relationship etc.)
- Students must pass the DICO to pass the course. An overall mark on the DICO of 50% must be achieved for the student to pass.
- Receiving a 1 (one) in any listed behavior constitutes a failure in the DICO regardless of overall DICO mark.
- If the student fails the DICO, and consequently the course, the student will receive a stanine of 3 (three) as an overall course grade regardless of any marks received in the other assignments in the course.

Over the 13 weeks, students will have a continuous experience in a community-based setting which will include:

1. Nursing practice with clients across the lifespan:
 - a) Assessing
 - Physical health status
 - Psychosocial health status
 - Spiritual health status
 - Individual/family
 - Target group (as appropriate to individuals/families)
 - Family/community environment
 - b) Plan, implement, and evaluate health promotion activities with individuals, groups and families.
 - c) Demonstrate competence in advanced therapeutic communication in a nurse-client relationship.
1. Participate in health promotion/prevention activities/programs/projects for clients of any age.
1. Participate in activities of the community agencies:
 - a) Develop knowledge of the agency, its services, the environment, the community related to the agency, how staff are involved in meeting agency goals and health promotion needs of clients, families, and groups.
 - b) Describe how principles of primary health care are met within the agency.
 - c) Describe leadership and management roles and competencies
 - d) Determine the decision making patterns in the agency.
 - e) Develop a cooperative relationship with colleagues, clients, community members, community agencies, and members of other disciplines.
1. **Learning Plan** **20%**

Students will develop a learning plan related to the development of their nursing practice in NS 3850. All students are expected to meet the course objectives at a satisfactory level. The learning plan is designed to allow students to use the clinical setting as a setting in which to explore a *minimum of three objectives* that are related to the clinical setting but unique to your

own learning needs. The objective of the learning plan may build on some of the selected course objectives or be especially developed to meet your unique learning needs/interests in this setting.

A learning plan is an agreement between the students and the tutor specifying what the student intends to learn, how this will be accomplished, the time frame for meeting the objectives and the methods by which achievement of the objectives will be measured.

The learning plan is intended to:

- Provide the student with an opportunity to individualize learning within the framework of the objectives for the course.
- Allow students to determine learning objectives in view of their own perception of their strengths and areas for improvement.
- Identify strategies for meeting the objectives.
- Identify evaluation strategies.
- Allow for student reflection on the learning that has occurred.

The components of a learning plan include:

Learning Objectives:

What do I need to learn (what knowledge and skills do I need to gain?) To be more effective in this clinical setting? Remember that objectives must be stated in specific behaviors and must be achievable in the time available (13 weeks).

Learning Strategies/Resources:

How will I accomplish this learning? What strategies (things that you will do, attend, participate in, seek out) and resources (literature searches, library resources: articles and books, interviews with and observation of experts, videos, experiences as part of a professional team or learning group etc.) will I use to help me achieve my learning?

Evidence of Learning:

What can I show, attach, present, include as evidence that I carried out the activities I planned, consulted the resources I set out to consult, gained the knowledge and skills I set out to gain?

Evaluation/Reflection (thinking about my learning):

Did I carry out the learning activities I had planned and consult the resources I had planned to consult? If not, why not? Were additional strategies and resources added? Why? Why not? Did I achieve my objectives? Did I learn what I set out to learn? What evidence do I have that I learned? If not, why not? What else did I learn? What surprise learning occurred? What more do I now need to learn? What does the learning mean to me?

1. Reflective Journal and Field Notes 20%

Field Notes

Field notes provide a log and brief description of the student's clinical activities. Details such as the amount of time spent in each activity, where the activity was completed and

what specifically was done are to be included.

Reflective Journal

The reflective journal should describe clinical incidents which you found significant and is meant to follow the field notes and NOT be another list of activities. *Students are encouraged to integrate literature sources within the journal.*

The clinical incidents should describe patient care episodes which stimulated your thinking. For each journal entry you may choose to discuss some of the following points:

1. Describe what nursing interventions you or others did.
2. Describe your decision-making process.
3. Describe what you would do differently when a similar incident occurs.
4. Describe the clinical incident in relationship to the parts and the whole.
5. Identify previously learned knowledge/clinical experience(s) that helped you in this situation.
6. Use Benner's competency statements and describe where you view yourself.
7. Describe your areas of strengths and weaknesses. Include your thoughts, perceptions and feelings.
8. Describe resources you identified and/or utilized and your rationale.
9. Describe how nursing theory or a model helped guide your practice.

Other questions you may want to consider in your journal are:

Which clinical experience this past week had most impact on me personally, professionally? How did it impact me? What were my thoughts, reflections as I engaged in that activity? How have the clinical activities of the week contributed to my achievement of course objectives and to the three objectives in my learning plan? Which course objectives were not addressed this week? Which issues came up in clinical this week that presented me with ethical dilemmas? Which experiences helped me see areas in which I need to learn more (be specific)? Identify clinical experiences that caused you to reflect on previous learned theory. How did the experience and the theory relate? What have I read that relates to this clinical experience? How does it relate?

1. **Presentation** **20%**

In consultation with the agency staff and your preceptor, each student will present a topic of relevance and interest to the agency staff. The presentation would be approximately 30 minutes in length, including time for discussion and questions.

The purpose of this presentation is to

- explore a topic of interest/relevance to nursing practice in this community setting in more depth
- gain experience in formal presentations to an audience of peers.

The presentation will be evaluated on:

- Clarity of presentation
- Organization of presentation
- Involvement/Interaction with peers/audience

Assignment of final course grade

Throughout the course, assignments are marked and recorded. At the end of the term all scores are totalled for a term summary mark. The final course grade is based on the term summary mark converted to the nine point grading system as per GPRC Grading Policy.

Nine Point Grade	Percentage Equivalent Guidelines	Designation
9	90-100	
8	80-89	Excellent
7	72-79	
6	65-71	Good
5	57-64	
4	50-56	Pass

3	45-49	Fail
2	26-44	
1	0-25	

University of Alberta - Faculty of Nursing
NS 3850
Grading of Learning Plans

	5	4	3	2	1
Objectives	Clear, detailed description of what the student intends to learn, how this will be accomplished, the time frame for meeting objectives & methods by which this will be evaluated are identified. Objectives are specific, concise & do not repeat course objectives. Objectives are reasonable, measurable and attainable.	Some detail missing but a clear direction is established by student in terms of what is to be learned, how this will be accomplished, the time frame & methods of evaluation to be used. Objectives are specific but occasionally repeat the course objectives. Objectives are reasonable, measurable & attainable.	Description of what the student intends to learn requires more detail in order to address what will be learned, methods or strategies by which this will be accomplished, in what time frame, & how this will be evaluated. Objectives adequate but frequently repeat course objectives. Objectives reasonable, measurable, & attainable.	Description of what the student intends to learn lacks enough detail to clearly identify the intent of the learning plan, how & when it will be accomplished & how this will be evaluated. Objectives are vague or ambiguous, difficult to measure. Repetition of course objectives.	Ambiguous and/or superficial plan of what the student intends to learn, few or inappropriate strategies, unrealistic time frame provided. Evaluation strategies inappropriate, lack specificity or are difficult to measure.
Strategies and Resources	Strategies and resources used to address objectives are varied, current, credible, & appropriate to goals set by student.	Strategies and resources used are appropriate & reflect student's intent re: meeting objectives	Strategies and resources are limited but adequate.	Strategies and resources identified are limited, not specific to objectives set by student.	Inappropriate and/or minimal resources and strategies selected.
Evidence of Learning	Clear description of evidence to be presented with excellent examples.	Clear description of evidence to be presented with good examples.	Description of evidence given with superficial examples.	Brief description of evidence, lacking in detail.	No discussion of evidence to be presented.

<p>Evaluation and Reflection</p>	<p>Clear description of extent to which objectives were met including specific examples or activities. If objectives not met, revised in order to be attainable. Substantive, insightful, comprehensive comments. Reflection includes deep thinking about personal and professional growth.</p>	<p>Clear description of extent to which objectives were met including some examples of activities. If objectives were not met, revised in a realistic way. Thorough analysis addresses significant points. Some specificity missing. Reflection includes good reflections about personal and professional growth.</p>	<p>Description of extent to which the objectives were met included but examples of relevant activities done superficially. If objectives were not met, are revised in an unrealistic or unattainable manner. Adequate analysis of major points. Some essential information missing. Reflection includes moderate reflection on personal and professional learning and growth that occurred.</p>	<p>Description of extent to which objectives were met given but brief, lacks detail and/or specificity. Unmet objectives not addressed. Key information missing. Minimal analysis, little insight. Minimal reflection on personal and professional learning that occurred.</p>	<p>Incorrect or inappropriate information. No analysis or insight. Superficial. No reflection on personal and professional learning/growth.</p>
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University of Alberta, Faculty of Nursing: Nursing 3850 Direct and Indirect Clinical Observation Guide

Objectives	5 Excellent	4 Good	3 Satisfactory	2 Marginal	1 Unsatisfactory
1. Analyze knowledge related to practice.	<u>Strong</u> analytic skills evident in written work and in practice. <u>Inclusively</u> considers nursing and related discipline knowledge related to practice with clients in all situations.	<u>Very good</u> analytic skills evident in written work and/or practice. <u>Thoroughly</u> considers nursing knowledge and includes some knowledge from related disciplines in practice with clients in all situations.	<u>Good</u> analytic skills evident in written work and/or practice. <u>Usually</u> considers nursing knowledge and may include some knowledge from related disciplines in practice with clients in most situations.	<u>Beginning</u> level analytic skills evident in written work and practice. <u>Superficially</u> considers nursing knowledge and some knowledge from related disciplines in practice with clients in all situations.	<u>Limited</u> or no analytic skills evident in written work or practice. Limited or no consideration of nursing and related discipline knowledge.
2. Demonstrate application of legal and ethical standards.	<u>Consistently</u> demonstrates support of colleagues, uses a decision making process, and incorporates client values, beliefs and rights within the nursing role.	<u>Frequently</u> demonstrates support of colleagues, uses a decision making process, and incorporates client values, beliefs and rights with the nursing role.	<u>Often</u> demonstrates support of colleagues, uses a decision making process, and/or incorporates client values, beliefs, and rights with the nursing role.	<u>Inconsistently</u> demonstrates support of colleagues, uses a decision making process and incorporates client values, beliefs, and rights with the nursing role.	Seldom demonstrates support of colleagues, uses a decision making process and incorporates client values, beliefs, and rights with the nursing role.
3. Demonstrate professional behaviours in practice	<u>Consistently</u> demonstrates respect, personal responsibility, and self awareness in practice. <u>Excellent</u> communication skills with colleagues and clients.	<u>Frequently</u> demonstrates respect, personal responsibility, and self awareness in practice. <u>Good</u> communication skills with colleagues and clients	<u>Often</u> demonstrates respect, personal responsibility, and self awareness in practice. <u>Good</u> communication skills with colleagues and/or clients	<u>Inconsistently</u> demonstrates respect, personal responsibility, and self awareness in practice. <u>Acceptable</u> communication skills with colleagues and clients	<u>Seldom</u> demonstrates respect, personal responsibility, and self awareness in practice. <u>Poor</u> communication skills with colleagues and clients
4. Demonstrate openness and receptivity , attitude of inquiry.	<u>Consistently</u> demonstrates openness and receptivity to change in written work and practice setting. <u>Consistently</u> demonstrates a positive attitude of inquiry in practice.	<u>Frequently</u> demonstrates openness and receptivity to change in written work and practice setting. <u>Frequently</u> demonstrates a positive attitude of inquiry in practice.	<u>Often</u> demonstrates openness and receptivity to change in written work and practice setting. <u>Often</u> demonstrates a positive attitude of inquiry in practice.	<u>Inconsistently</u> demonstrates openness and receptivity to change in written work and practice setting. <u>Inconsistently</u> demonstrates a positive attitude of inquiry in practice.	<u>Seldom</u> demonstrates openness and receptivity to change in written work and practice setting. <u>Seldom</u> demonstrates a positive attitude of inquiry in practice.

5. Demonstrate primary responsibility for attaining competence	<u>Consistently</u> demonstrates primary or personal responsibility for attaining competence in nursing practice (ie: identifies directions and strategies for learning, seeks assistance as needed).	<u>Frequently</u> demonstrates primary or personal responsibility for attaining competence in nursing practice.	<u>Often</u> demonstrates primary or personal responsibility for attaining competence in nursing practice.	<u>Inconsistently</u> demonstrates primary or personal responsibility for attaining competence in nursing practice.	<u>Seldom</u> demonstrates primary or personal responsibility for attaining competence in nursing practice.
6. Apply health promotion and prevention concepts	<u>Consistently</u> demonstrates safe practice; coordinates care using superior clinical judgement, critical thinking and innovation; demonstrates competence in mobilizing community power structures; and demonstrates beginning competence in dealing with diversity and ambiguity.	<u>Frequently</u> demonstrates safe practice; coordinates care using superior clinical judgement, critical thinking and innovation; demonstrates competence in mobilizing community power structures; and demonstrates beginning competence in dealing with diversity and ambiguity.	<u>Often</u> demonstrates safe practice; coordinates care using superior clinical judgement, critical thinking and innovation; demonstrates competence in mobilizing community power structures; and/or demonstrates beginning competence in dealing with diversity and ambiguity.	<u>Inconsistently</u> demonstrates safe practice; coordinates care using superior clinical judgement, critical thinking and innovation; demonstrates competence in mobilizing community power structures; and/or demonstrates beginning competence in dealing with diversity and ambiguity.	<u>Seldom</u> demonstrates safe practice; coordinates care using superior clinical judgement, critical thinking and innovation; demonstrates competence in mobilizing community power structures; and demonstrates beginning competence in dealing with diversity and ambiguity.

<p>7. Demonstrate competence in interaction and collaboration with others.</p>	<p><u>Consistently</u> demonstrates competence in ability to interact with and develop collaborative relationship with clients, community members, nurses, members of other disciplines. <u>Consistently</u> displays valuing of others, respect for autonomy, and commitment to caring.</p>	<p><u>Frequently</u> demonstrates competence in ability to interact with and develop collaborative relationship with clients, community members, nurses, members of other disciplines. <u>Frequently</u> displays valuing of others, respect for autonomy, and commitment to caring.</p>	<p><u>Often</u> demonstrates competence in ability to interact with and develop collaborative relationship with clients, community members, nurses, members of other disciplines. <u>Often</u> displays valuing of others, respect for autonomy, and commitment to caring.</p>	<p><u>Inconsistently</u> demonstrates competence in ability to interact with and develop collaborative relationship with clients, community members, nurses, members of other disciplines. <u>Inconsistently</u> displays valuing of others, respect for autonomy, and commitment to caring.</p>	<p><u>Seldom</u> demonstrates competence in ability to interact with and develop collaborative relationship with clients, community members, nurses, members of other disciplines. <u>Seldom</u> displays valuing of others, respect for autonomy, and commitment to caring.</p>
<p>8. Demonstrate competence in skills in community practice.</p>	<p><u>Consistently</u> demonstrates competence in appropriate skills in the community setting, including communication, assessment, facilitation of learning, and planning, implementation and evaluation of appropriate intervention strategies.</p>	<p><u>Frequently</u> demonstrates competence in appropriate skills in the community setting, including communication, assessment, facilitation of learning, and planning, implementation and evaluation of appropriate intervention strategies.</p>	<p><u>Often</u> demonstrates competence in appropriate skills in the community setting, including communication, assessment, facilitation of learning, and planning, implementation and evaluation of appropriate intervention strategies.</p>	<p><u>Inconsistently</u> demonstrates competence in appropriate skills in the community setting, including communication, assessment, facilitation of learning, and planning, implementation and evaluation of appropriate intervention strategies.</p>	<p><u>Seldom</u> demonstrates competence in appropriate skills in the community setting, including communication, assessment, facilitation of learning, and planning, implementation and evaluation of appropriate intervention strategies.</p>