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UNIVERSITY OF ALBERTA
COLLABORATIVE BACCALAUREATE
NURSING PROGRAM
DIPLOMA COMPLETION OPTION
Grande Prairie Regional College
Grant MacEwan Community College
Keyano College
Red Deer College

NURSING 3990
COURSE OUTLINE
FALL 2002

Nurs 3990 - 6
(0 - 0 - 518) 14 weeks
Transition to the Graduate Role

Calendar Statement

Nursing practice will focus on a selected group of clients, for those experiencing both mental and physical variances in health, in an acute care context. Integration of previous learning and transition to the graduate role will occur. Prerequisite – NURS 3980

Course Leader

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Course Description

This course provides students with the opportunity to integrate theory and practice in complex health care situations. The focus will be on the gradual assumption of the duties and responsibilities of the beginning graduate.

Course Objectives

Upon completion of NURS 3990, the student will be able to:

1. Analyze nursing knowledge as well as knowledge from other disciplines (research, models and theories) related to bio, psycho, socio, and spiritual factors in nursing practice with clients experiencing more acute variances in health.
2. Demonstrate application of legal and ethical standards in a variety of nursing practice settings by: support of colleagues, decision making, incorporating clients' values, beliefs, and rights within the social mandate and the role of the professional association.
3. Demonstrate professional behaviors in nursing practice (respect, communication, responsibility, self awareness).
4. Demonstrate primary responsibility for attaining competence in nursing practice.
5. Analyze concepts related to health promotion, primary, secondary and tertiary prevention, with clients with increased complexity and more acute variances in health by:
 - demonstrating safe nursing practice.
 - coordinating care using clinical judgment, critical thinking and innovation with increasing independence.
 - demonstrating beginning competence in dealing with diversity and ambiguity.
 - demonstrating an attitude of inquiry in nursing practice.
6. 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.
7. Demonstrates competence in a variety of skills: communication and informatics, assessment (physical, psychological, family), psychomotor, and teaching.
8. Apply essential concepts basic to leadership and management at a beginning level.

Required Learning Experiences

Clinical practice experience will occur in acute care settings working with clients experiencing complex and unstable variances in health. The clinical experience will be preceptored by a registered nurse working in the clinical practice area.

In order to pass NS 3990 the student must:

- Demonstrate safe ethical nursing practice
- Display professional behaviour
- Adhere to the AARN Standards of Nursing Practice
- Complete 518 hours of clinical practice

- Participate in computer orientation and other relevant orientation activities
- Achieve a minimum grade of satisfactory for each item of the clinical evaluation form
- Complete the following experiences and assignments

Course Evaluation

Learning Plan 10%	due: the day following the completion of the first 48 hours of clinical and at the end of the clinical rotation
Learning moment reflective journal 40%	due: Oct 1, Oct 22, Nov 15 & Dec 6, 2002
Direct Clinical Observation 50%	due: last day of assigned clinical experience

Late assignments will receive a 5% penalty for each working day late. Assignments may be dropped off at the nursing department office, in the drop off box if dropping off the assignment after hours, given directly to the clinical tutor, faxed, mailed to the college department in care of the clinical tutor or, emailed to the clinical tutor.

Learning Plan (10%)

The purpose of the learning plan is to guide the nursing student's practice during the senior nursing practicum. Using a combination of the learning objectives for Nursing 3990 with their own learning objectives while considering their particular learning style, the student will identify and articulate to their preceptor their learning objectives.

The learning plan is an agreement between the student, preceptor and clinical tutor specifying **what** the student intends to learn, **how** the objective will be accomplished, the **time frame (when)** for completing the objective and the methods by which achievement of the objective will be measured i.e. **evaluation strategies**. There is no specified number of objectives that need to be completed, however upon consultation with the preceptor specific objectives which are necessary learning experiences for the clinical area might be developed and added to the original document developed by the student.

The learning plan therefore, is a working document that is to be used by the student, preceptor and clinical tutor to select learning opportunities that will assist the student to meet his/her own individual objectives for the course **and**, is intended to used as a supporting document for the student's evaluation.

Asking the following questions may be useful when developing objectives.

- a). What theoretical knowledge do I need to function safely in the clinical setting?
- b). At a proficiency level, what skills do I need to develop and demonstrate in this clinical setting?
- c). What experiences do I need to seek out in order to facilitate the transition from student to graduate role?
- d). How do I develop and maintain nursing practice competency as mandated by the professional association (AARN)?

The learning plan should include all of the following items:

1. *Clear, specific objectives*
2. *Strategies to be used to complete the objectives*
3. *Time lines for when the objectives are to be completed*
4. *Methods of evaluation (may include feedback from the preceptor or from the tutor, reflective journaling, etc.)*
5. *Documentation of the completion of the objectives (should include a summary and application of any readings, inservices attended, specific anecdotes reflecting the application of what was learned, etc.)*

It is important to note that the learning plan will be discussed with the preceptor early in the rotation and will be submitted to the clinical tutor **the day after the first 48 hours of the clinical experience is completed**. Because the learning plan is a working document and will be subject to revisions, the original and **revised** learning plan will also be submitted to the clinical tutor **within 24 hours of having completed the clinical experience**. **Each submission will be graded out of 5% for a total weighting of 10% of the final mark.**

Please refer to the Marking Guide for Learning Plan attached.

Learning Moment Reflective Journal (40%)

The purpose of this assignment is to provide the student with the opportunity to "think aloud" on paper, reflecting on their own perception or understanding of the situations he/she may encounter during the senior practicum. The situation which the student may choose to reflect on need not be a "negative" experience, but rather should be a situation which leads the student to pause and ask questions. Students then are given the opportunity to "...synthesize theory and practice, apply relevant research and literature to actual practicum experiences, and raise questions for further study" (Brown & Sorrell, 1993, p. 16).

For each of the four submissions, the critical incident reflective journal will have three parts as described below.

First Part:

- Write a complete, succinct summary of the event attended/experienced. Carefully document objective and subjective observations made. Clearly identify which data are objective and which are subjective.
- Examine these data and describe what you have learned about nursing practice.

This part should be no more than 2 pages, typed and double spaced.

Second Part:

Using the summary, the student will

- Identify assumptions made by themselves and others in relation to the critical incident.
- Discuss the strengths and weaknesses of the data on which you have based your conclusions.

This part should be no more than 2 pages, typed and double spaced.

Third Part:

- Formulate a point of view of what should/could happen to resolve the issue pertaining to the critical incident.
- Provide specific evidence from the nursing literature or other relevant literature which supports your point of view. Only the *literature which supports your point of view should be presented*. This portion of the assignment should be developed using the approach of trying to convince a doubting audience that change in nursing practice is required or alternately, that nursing practice as described, is safe, competent and satisfactory. Present a succinct argument using logical and relevant evidence to assert your point of view.
- Formulate questions for further study that this critical incident has raised for you.

This part of the assignment should be no more than 3 pages, typed and double spaced.

The assignment format will have the headings: Part I, Part II and Part III clearly marked.

Brown, H. N. & Sorrell, J. M. (1993). Use of clinical journals to enhance critical thinking. *Nurse Educator*, (18)5, p 16-19.

Direct Clinical Observation (50%)

Students are expected to practice with increasing independence under the supervision of a Registered Nurse preceptor. Observations will be made by the preceptor and/or clinical tutor and may be supplemented with input from peers, the staff of the practice setting and the client.

A written summative evaluation will be completed by the student, preceptor, and clinical tutor. A written formative evaluation may be requested at any time by the student, preceptor or clinical tutor.

Over the fourteen weeks the student will have a continuous experience in an area of special interest which will include:

1. Demonstration of the transition to the graduate role in providing safe nursing care for multiple and complex clients in ambiguous and complex situations.
2. With increasing independence, interact with and develop collaborative partnerships with multiple clients, community members, nurses, and members of other disciplines
3. Demonstrate beginning leadership, management, and administrative skills. (e.g. case management, delegation, team leading, case co-ordination, conflict resolution, crisis management, and utilization of research to support change in nursing practice).

Students are expected to implement previously learned nursing skills.

The clinical experience will begin the week of September 4, 2002, and will continue until 518 hours have been completed. Students are to work the same clinical hours as their preceptor. This may include days, evenings, nights, and weekend shifts. If there are changes to be made to the clinical rotation due to other commitments (for example classes, doctor's appointments, etc.), these changes must be negotiated at the beginning of the rotation between the student and preceptor. Changes to the rotation must be brought to the clinical tutor's attention as soon as possible. Should the student miss any clinical time as a result of illness, additional clinical hours must be arranged as needed in order to complete the required number of clinical hours. If the student is unable to complete the required clinical hours for any reason, the clinical tutor must be contacted immediately. **It is expected that the student will have completed the required clinical hours by December 13 2002.**

Within the first 48 hours of the clinical experience, the student is to share with the preceptor their learning objectives as outlined in the learning plan. Preceptors are encouraged to contact the clinical tutor should any questions arise from the learning plan or negotiated clinical experience.

In order to assist the preceptor and student in assigning a grade for the clinical experience, the following guides have been attached: *Nursing 491/495 Direct Clinical Observation Guide to Grading and Direct Clinical Observation*. The final grade for the clinical experience will be negotiated with the student, preceptor **and** clinical tutor. Sources of information which can be used to determine the DCO grade include: learning plan, course objectives, feedback from nursing and medical staffs, students, observations made by the

preceptor, clients, student self-evaluation and tutor feedback. It is suggested that anecdotes be kept by the student, preceptor and clinical tutor throughout the rotation so that these may be used to complete the evaluation form reflective of the clinical experience and as accurately as possible at the end of the rotation. **An appointment time for completing the final evaluation will be negotiated with the preceptor, student and clinical tutor.**

Due attention is paid to the descriptions of the various grade points according to the Grande Prairie Regional College calendar.

Excellent	9	90-100	Outstanding
	8	80-89	Excellent
Good	7	72-79	Very Good
	6	65-71	Good
Satisfactory	5	57-64	Satisfactory
	4	50-66	Pass
Fail	3	45-49	Unsatisfactory
	2	26-44	Unsatisfactory
	1	0-25	Unsatisfactory