



UNIVERSITY OF ALBERTA  
COLLABORATIVE BACCALAUREATE  
NURSING PROGRAM

Grande Prairie Regional College

Keyano College

Red Deer College

University of Alberta

NURSING 1950

COURSE OUTLINE

Winter 2010

February 22<sup>nd</sup> – April 16<sup>th</sup>, 2010

Originally developed by the Clinical Experience Development Committee

Revised by the Learning Experiences Development Committee, April 2007

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Approved: April 2007

## Nursing 1950 Course Outline

### CALENDAR STATEMENT:

NURS 1950 Nursing Practice II

\*4 (fi 8) (1-15c-2 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

**COURSE HOURS:** 161 hrs over 7 weeks

Seminar: 27 hours      Clinical: 117 hours      Lab: 17 hours

**Clinical Schedule:** Tuesday, Wednesday, Thursday; 0700-1420hrs [Seminar 1300-1420].

### COURSE DESCRIPTION:

This course will provide opportunities for students to participate in health promotion and primary (disease/injury) prevention activities with clients across the life span 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.

### FACULTY

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Jennifer Hatala RN, BN E401-3	(780) 539-TBA	<a href="mailto:jhatala@gprc.ab.ca">jhatala@gprc.ab.ca</a>

### Clinical Practice Areas:

Raelynn's Group	Mackenzie Place (2 East)
Jennifer's Group	Mackenzie Place (1East)
Jim's Group	Grande Prairie Care Centre

## Required Learning Experiences

*In order to pass NS 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 (continuing care facility) which will include nursing practice with individuals across the life span, in the context of family.
2. Participate in health-related activities of the community agency.
3. Complete a comprehensive health history on an individual.
4. Engage in a health promotion activity based on identified needs.
5. Examine the role of the registered nurse.
6. Assess a client using a selected nursing model.
7. Perform selected nursing care (i.e., ADL, hygiene).

In this clinical placement you will be responsible for the care of 1-2 residents for the full 6 weeks. This includes all Activities of Daily Living (bedmaking, hygiene, dressing, mobilizing, feeding, etc.), implementing and building upon communication theory, medication administration, learning to work as a team, as well as practicing psychomotor skills such as health history and certain physical assessment skills (respiratory and integumentary), glucometers, and vital signs.

Your experience may also include a day with: the bath team, the medication nurse (observation), and observation during a patient conference with an interdisciplinary or a multidisciplinary team (not necessarily your resident), depending on the clinical area. Also, you may have the opportunity to work with recreational therapy personnel where available.

### Labs

**Labs will occur during the orientation week** to assist you in providing care for your clients. Attendance at labs is mandatory.

The labs that will occur during orientation week include:

1. Nutrition & Feeding Lab
2. Functional Assessment: ADL (Activities of Daily Living) – Toileting, Dressing, Grooming and Safety; aids to mobility (canes, walkers, and wheelchairs)
3. Ambulation and Transfers: Back care and using patient lifts
4. Comfort and Hygiene (Bathing, backrubs, bed making, oral hygiene, Braden Scale)
5. Medication administration lab (oral, topical, ophthalmic/otic, rectal/vaginal suppositories, inhalation, 7 Rights).
6. Diabetes and Glucometers

## **Seminars:**

Seminar is a time for the students to debrief about their day and to consolidate their knowledge. The instructor may have you present topics to discuss or there may be formal topics/labs that occur during that time to help supplement the long term care experience.

There will be individual group seminars every day with your clinical group, except for the days that are listed on your Clinical and Seminar Schedule when the whole group is together.

**Seminar is from 1300-1420 everyday you are in clinical.**

Due to infection control concerns, students will not be permitted to wear their scrubs and clinical attire outside of the facility. If joint seminars are booked at the college then the student is required to bring an alternate change of clothing.

## **Joint Seminars:**

**Refer to Clinical and Seminar Schedule Handout for Dates and Locations.**

# **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:** The clinical tutor provides input every now and then.

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

## **PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE**

- 1. Practice 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 assistance:**

- demonstrate application of legal and ethical standards:
  - practice according to policies and procedures of host agencies and educational institution
  - use knowledge of scope of practice and professional legislation and Code of Ethics
  - confidentiality
  - use informed consent
  - prepare 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 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
- identify nursing issues requiring social and political action:
  - identify programs which have arisen from social and political action
- discuss the role of the individual nurse in social and political action:
  - identify role in existing programs
- 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 funding sources (re: existing programs)
  - 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

**With assistance:**

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

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

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

**With assistance:**

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

### **6. Demonstrate evidence-based practice.**

**With 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 assistance:**

- discuss the use of nursing models/theories/metaparadigms
- identify 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 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 assistance:**

- apply principles of primary health care to healthy individuals across the life span
- apply knowledge of health determinants in client situations
- apply selected health promotion activities with individuals:
  - develop professional skills needed for taking action (e.g., teaching/learning).

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

- 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 (boundaries):
  - initiate, maintain and terminate professional relationships in a supportive manner
  - social vs. therapeutic.

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

- encourage client participation, choice and control
- encourage colleague participation, choice and control
- develop co-operative relationships with colleagues, community members, community agencies and members of other disciplines
- interact with clients with stable variations in health
- engage in inter-professional interaction.

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

- identify 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
- 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 assistance:**

- apply nursing process
- use appropriate verbal communication skills
- use appropriate written communication skills
- provide effective client education by applying:
  - principles of teaching and learning
- 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 assistance:**

- 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.



**Department of Nursing Education and Health Studies Grande Prairie  
Regional College & Alberta health Services  
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.

***Used with permission of Red Deer College Nursing Faculty. Revised: August 28, 2003***

## Required and Recommended Resources

### Required Resources:

Posted on Moodle

1. Working Definitions
2. Graduate Competencies and Year End Outcomes
3. Course Outline
4. Evaluation of Nursing Practice (ENP)
5. Student Handbook

Ackley, B. & Ladwig, G. (2008). *Nursing diagnosis handbook: An evidence-base guide to planning care* (8<sup>th</sup> Ed.). Toronto, ON: Elsevier Mosby.

### From NS 1900:

Canadian Nurses Association (2008). *Code of ethics for nurses*. Retrieved October, 21<sup>st</sup>, 2009, from [http://www.cna-aic.ca/CNA/documents/pdf/publications/Code\\_of\\_Ethics\\_2008\\_e.pdf](http://www.cna-aic.ca/CNA/documents/pdf/publications/Code_of_Ethics_2008_e.pdf)

Chabner, D.E. (2009). *Medical terminology: A short course* (5<sup>th</sup> ed.). Philadelphia, PA: Elsevier Saunders.

Pickar, G.A., Graham, H., Swart, B., & Swedish, M (2009). *Dosage calculations* (1<sup>st</sup> Canadian ed.). Toronto: Nelson Education Ltd.

Potter, P.A. & Perry, A.G. (2009). *Canadian fundamentals of nursing* (4<sup>th</sup> ed.). Toronto: Elsevier Canada.

Estes, M. & Buck, M. (2008). *Health assessment and physical examination* (1<sup>st</sup> ed.). Toronto: Thomson Nelson.

Wilson, B., Shannon, M, & Shields, K. (2009). *Prentice hall nurse's drug guide 2009*. Upper Saddle River, NJ: Pearson Prentice Hall.

### Optional Resources:

Lewis, S., Heitkemper, M., Dirksen, S.R., Barry, M., Goldworthy, S., & Goodridge, G., (2009). *Medical surgical nursing: Assessment and management of clinical problems* (2<sup>nd</sup> ed.). St Louis, MI: Mosby.

## Required Evaluation

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

### 1. Evaluation of Nursing Practice (ENP) (85% of overall grade)

The Evaluation of Nursing Practice is a written evaluation of Nursing Practice that will be completed by the student and the instructor during the final evaluation. Student and tutor also meet at midterm to discuss the student's performance. **In order to pass NS 1950, students must demonstrate safe, ethical nursing practice; professional behavior and acquire a passing grade in the ENP.**

Students MUST pass the ENP in order to pass the course. If a student receives 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. If a student does not pass the ENP they will obtain an overall grade of no greater than a D in the course.

*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.

#### Midterm Evaluations

**Week of March 22<sup>nd</sup> – 26<sup>th</sup>, 2010.**

Students will be required to complete a midterm evaluation where they book an appointment with the tutor to discuss their strengths and areas to work on. It is not required to complete the ENP form during midterm unless asked so by your tutor.

#### Final Evaluations

**Friday April 16, 2010.**

Final evaluations are more formal and require the student to do the following:

- Book an appointment with the tutor.
- Complete the Evaluation of Nursing Practice Form with examples and an overall grade. Form is found on Moodle, and in the course outline.
- Bring this form to the appointment with the tutor.

The tutor will also complete the form which is supplemented by:

- Their observations of you in clinical, post conferences and seminar
- Input from peers, the staff of the agency, and the client
- Student's reflective journals (please see reflective journal guidelines).
- Care plan discussions and organizing your day with your client.

## **2. Nursing Care Plan Worksheets and Presentation: (15% of overall grade).**

Students will be introduced to the nursing process and how it is used to provide effective and individualized care to their resident. Focus will be on health promotion and disease/injury prevention.

Students will complete weekly care plan worksheets to explore and understand the nursing process and how to use the nursing diagnoses handbook as a tool for planning and implementing care. Worksheets will be handed out during orientation as well as a grading guide for the presentations.

Throughout the clinical experience, students will apply these concepts learned from the worksheets to their individual resident and:

- develop a comprehensive care plan for their resident
- implement and evaluate the effectiveness of the care plan

Students will then present this information at a date and time to be determined by the clinical instructor during the individual group's seminar time.

Breakdown of Care Plan Grade:

Weekly Care Plan Worksheets:	5%
Care Plan Presentation:	<u>10%</u>
	15%

***In addition to the above Evaluations, student must also successfully pass the following:***

### **Dosage Calculations and Medical Terminology Quiz:**

**Will occur February 26<sup>th</sup>, 2010; 0900-1100 during seminar time.**

- Read and complete **chapters three, four and five (3, 4, & 5)** in Chabner, D.E. (2009). *Medical terminology: A short course* (5<sup>th</sup> ed). Philadelphia, PA: Elsevier Saunders.
- Read and complete **chapters 5, 6 & 7** in Pickar, G.A., Graham, H., Swart, B., & Swedish, M (2009). *Dosage calculations* (1st Canadian ed.). Toronto: Nelson Education Ltd.
- You must pass the quiz to receive credit for NS 1950. It is a pass/fail quiz, 90% is required to receive a "Pass" on this test. You may have two re-writes.**
- If you do not pass the re-writes with a mark of 90% you will be required to withdraw from the NS 1950 course.**

### **Oral Medication Administration Skills OSCE**

- a. This will occur in clinical when you are scheduled for medication administration. Content will be based on the medication lab..
- b. You must attempt the OSCE when it is scheduled, and if needed you will have two additional attempts to ensure your success.
- c. Pass mark is 80% with two repeats. If the student is unsuccessful after all 3 attempts they will receive an “F” in the appropriate section of the ENP and fail the course.

## Reflective Journal Guidelines

Reflective journaling is an excellent tool to analyze personal and professional growth in the clinical setting. It allows you 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). These journals will be not be assigned a separate grade but will be subsumed in evaluative components of the ENP under Knowledge Based Practice; Applies a critical thinking approach to nursing.

<b>Journal #1</b>	<b>Due Friday, March 26<sup>th</sup>, 2010 at 0900 hours</b>
<b>Journal #2</b>	<b>Due Friday, April 9<sup>th</sup>, 2010 at 0900 hours</b>

### How to write your journal:

1. Choose a situation that is significant for you that occurred during clinical. Situations that went particularly well or a situation that was difficult for you is a good place to begin to reflect on your strengths or areas to work on in your practice.
2. Describe the situation. What was going on? What happened? How did the resident, family, or other staff respond? (To ensure confidentiality, initials or a description of persons involved should be used.) Use lots of descriptive words.
3. Analyze the 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? How does this experience compare to other situations you have had?
4. In the second journal respond to your tutor's questions as best as you can as you continue to reflect on the same situation or on a new situation.
5. If references are used, you must reference these using APA format.

A maximum of 750 words is expected for each journal. It needs to be double spaced and type written. You are encouraged to email your journal to your tutor and he/she will provide you with feedback.

*Adapted from the  
College and Association of Registered Nurses of Alberta.*

## 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

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

### Failing Grades in Nursing Courses

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

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

**\*\*Note:** Refer to the 2009-2010, p. 107 College calendar for further details regarding the grading policy and Progression Criteria in the Bachelor of Science in Nursing program.

## 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.

**Students MUST pass the ENP in order to pass the course. If a student receives 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. If a student does not pass the ENP they will obtain an overall grade of no greater than a D in the course.**

Evaluation	Grade	4-point Equivalent	Percentage of Total Mark	Value
ENP			85%	
Care Plan			15%	
Med/Math Calc			Pass/Fail	
OSCE			Pass/Fail	
				<b>TOTAL:</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.



## **Policies Related to NS 1950 Clinical Experience**

Last Day to withdraw with permission: **April 5, 2010.**

All GPRC Policies can be located at the following Website:

<http://www.gprc.ab.ca/about/administration/policies.html>

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

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.

Absence from any part of the clinical experience including labs, orientation, clinical, and seminars will jeopardize overall clinical performance. Absences from clinical may result in the instructor's being unable to evaluate the student's clinical performance, resulting in a grade of F. 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) to which they have been assigned.

See page 15 of the 2009-2010 Student Handbook for more information related to clinical absences.

### **Clinical Progression Criteria:**

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.

Missed clinical time: a student who is absent more than two clinical days in one clinical nursing course may need to make up the lost time before being allowed to continue in the program. Absences from the clinical site may result in the instructor not being able to evaluate the student's clinical performance. If clinical performance cannot be evaluated, a failing grade may be assigned in the course.

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 and considered in determining continuation in the program.

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.

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.

Please see page 15 of your 2009-2010 student handbook for the complete Policy Related to Clinical Absences.

### **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 section in the Grande Prairie Regional College 2009/2010 Calendar.

We expect honesty from our students. This demands that the contribution of others be acknowledged (GPRC Calendar, 2009-2010). 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. Late assignments are due by 4:00 p.m. and must be verified (stamped with date and time) by Nursing office personnel. See page 9 of 2009-2010 Student handbook for more information.

### **Immunizations, CPR and WHMIS Certification:**

You are responsible for ensuring that all immunization requirements are met and remain current throughout your nursing program. Students who do not complete immunization requirements may be barred from taking clinical courses. See page 109, Grande Prairie Regional College Calendar re: immunization requirements and Standard First Aid certification. Students must bring their immunization records to the Nursing Office – H206. Immunizations must meet U of A criteria to transfer into Year 4.

A Cardio-Pulmonary Resuscitation (CPR-HCP) certificate for Health Care Providers must be valid and maintained throughout the program. Students failing to maintain current CPR-HCP certification will not be allowed into clinical areas. Students must bring their signed CPR-HCP cards to the Nursing Office (H206) annually to prove this has been completed.

Students are required to have WHMIS certification. Students must provide a photocopy of these certifications before their first clinical placement or they will not be allowed to attend the practicum.

### **Name Tags:**

Students are provided with Photo ID that will serve as the official means of identification in all clinical areas. All students are required to wear Photo ID in clinical settings whether they occur in an agency or in a community/home environment.

**Professional Dress in Clinical Agencies:**

It is the students' responsibility to be familiar with the dress code of the institution and/or agencies in which they are working.

For safety reasons, the only jewelry that may be worn is one pair of small stud earrings, a serviceable watch, and a plain wedding band. You will be required to remove obvious body piercing jewelry for safety reasons. Hair should be neat and off the face, with shoulder length or longer hair tied back. No nail polish may be worn. White or neutral stockings/underwear are to be worn with uniforms. Makeup should be minimal and perfume is not to be worn. The use of perfumed lotions, deodorants and powders is strongly discouraged.

Uniform scrub jackets and white or solid pastel colored cardigans are acceptable when needed. Shoes will be soft soled.

Good personal hygiene and grooming are part of a nurse's professional decorum. The faculty reserves the right to suggest the appropriateness of student appearance in the clinical setting. Students are required to purchase a stethoscope and a penlight, and to have uniforms and scissors in the practica setting.

**Psychomotor Skills and Using Patient Lifts:**

It is an expectation that all psychomotor skills and assessments be observed by the tutor for the first time. The tutor will inform the student if they are able to perform the skills/assessments independently afterwards.

For safety reasons, all students must have one other person with them during a patient mechanical lift. If a student is not clear on how to use the mechanical lifts, it is their responsibility to inform the tutor.

## Clinical Expectations for Continuing Care

### Illness/Sickness:

- If you are ill please call the instructor and if the instructor cannot be reached, the unit and leave a message with the staff on the floor.
  - 1East (780) 538-7374
  - 2 East (780) 538-7102
  - GP Care Center (780) 532-3525

### Coffee Breaks/Meal Breaks:

- 8 hour shift
  - 15 minute coffee break
  - 30 minute lunch 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 area available for residents and visitors only.
- Students must use the designated smoking areas outside the facility. You may only smoke on your designated break. The time allotted for break will not be extended.

### Medication Administration:

- 1<sup>st</sup> year nursing students will begin to administer medications.
- All medications must be reviewed with the instructor prior to a student giving anything.

### Patient Assignments:

- Students will be assigned to at least one resident for this clinical experience and will receive this information in a timely manner. If a student assignment is changed during the clinical rotation, they 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. The student will be expected to answer appropriate questions for their 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 you are unprepared for clinical, you will be asked to leave the clinical unit for that shift and be marked as absent. This will also adversely affect your ENP grade. See absence policy for progression implications.
  - 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 items to include in your organizational plan 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 a skill 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 of any changes. You must 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.

**Punctuality**

You need to be prepared for report at 0700; we recommend that you're on the floor by 0645. Lateness will affect your ENP and possibly your progression to second year.

## ORAL MEDICATION OSCE

**Student:** \_\_\_\_\_

**Examiner:** \_\_\_\_\_

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

**Yes No**

<input type="checkbox"/>	<input type="checkbox"/>	1. Washes hands
<input type="checkbox"/>	<input type="checkbox"/>	2. States would check doctor's order
<input type="checkbox"/>	<input type="checkbox"/>	3. Calculates the correct dose.
<input type="checkbox"/>	<input type="checkbox"/>	4. Takes medication and checks 3 times for the 7 rights
<input type="checkbox"/>	<input type="checkbox"/>	5. Performs 2 patient checks before giving the medication (arm band and have client state their name), assesses for drug allergies.
<input type="checkbox"/>	<input type="checkbox"/>	6. States would assess if there are contraindications for oral medications such as swallowing difficulties, GI problems, gastric suctioning or cognitive deficits.
<input type="checkbox"/>	<input type="checkbox"/>	7. Discusses with the instructor the medication including action, purpose, normal dosage and route, common side effects, time of onset and peak, nursing implications and patient teaching.
<input type="checkbox"/>	<input type="checkbox"/>	8. Administers medication using medical asepsis
<input type="checkbox"/>	<input type="checkbox"/>	9. Stays until client has swallowed medication
<input type="checkbox"/>	<input type="checkbox"/>	10. Signs and returns medication administration sheet to appropriate chart
<input type="checkbox"/>	<input type="checkbox"/>	11. States would chart in the nurses progress notes if giving a PRN medication

**TOTAL:** \_\_\_\_\_

**Pass Requirement: 8/11**

11

**Instructor Comments:**

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## Nursing 1950 Evaluation of Nursing Practice

**Students MUST pass the ENP in order to pass the course. If a student receives 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. If a student does not pass the ENP they will obtain an overall grade of no greater than a D in the course.**

**Student Name** \_\_\_\_\_

**Tutor** \_\_\_\_\_

**Clinical Placement:** \_\_\_\_\_

**Overall Grade** \_\_\_\_\_

- A Student consistently exceeds the expectations of each of the bulleted items on the ENP.
- B Student occasionally exceeds the expectations of each of the bulleted items on the ENP.
- C Student consistently meets the expectations of each of the bulleted items on the ENP.
- D Student occasionally does not meet the expectations of each of the bulleted items on the ENP .
- F Student regularly does not meet the expectations of each of the bulleted items on the ENP .

**A: Excellent B: Very Good C: Good, Average, Satisfactory D: Minimal Pass F: Fail**

	A	B	C	D	F
<b>PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE</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>Independently:</b> <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> <b>With assistance:</b> <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> <li>○ demonstrates commitment to the values of the profession of nursing and support of professional development of colleagues</li> </ul> </li> </ul>	<b>Comments:</b>				



**A: Excellent B: Very Good C: Good, Average, Satisfactory D: Minimal Pass F: Fail**

2. Engages in strategies for social and political action at a beginning level	A	B	C	D	F
<p>With assistance:</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>	Comments:				
3. Demonstrates skills and attitudes necessary for life-long learning .	A	B	C	D	F
<p>Independently</p> <ul style="list-style-type: none"> <li>○ demonstrates personal responsibility for learning</li> </ul> <p>With assistance:</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 <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> </li> </ul>	Comments:				
KNOWLEDGE BASED PRACTICE	A	B	C	D	F
4. Applies a critical thinking approach to nursing.	A	B	C	D	F
<p>With assistance:</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>	Comments:				

**A: Excellent B: Very Good C: Good, Average, Satisfactory D: Minimal Pass F: Fail**

5. Applies nursing knowledge, including knowledge from the arts, humanities, medical sciences, and social sciences into nursing practice.	A	B	C	D	F
With assistance: <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>	Comments:				
6. Demonstrates evidence based practice.	A	B	C	D	F
With assistance: <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>	Comments:				
7. Applies nursing and other relevant models/theories in the professional practice of nursing.	A	B	C	D	F
With assistance: <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>	Comments:				
8. Demonstrates competence in health care informatics.	A	B	C	D	F
With assistance: <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>	Comments:				
<b>PROVISION OF SERVICE TO PUBLIC</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	C	D	F
With assistance: <ul style="list-style-type: none"> <li>applies principles of primary health care to with healthy individuals across the lifespan</li> <li>applies knowledge of health determinants in client situations</li> <li>applies selected health promotion activities with individuals</li> <li>develops professional skills needed for taking action (eg. teaching/learning)</li> </ul>	Comments:				
10. Demonstrates caring relationships in professional situations.	A	B	C	D	F
With assistance: <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>	Comments:				

**A: Excellent B: Very Good C: Good, Average, Satisfactory D: Minimal Pass F: Fail**

11. Collaborates with clients, community agencies, community members, and members of other disciplines in a variety of settings.	A	B	C	D	F
With assistance: <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>	Comments:				
12. Demonstrates beginning leadership, management and administrative skills.	A	B	C	D	F
With assistance: <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>	Comments:				
13. Demonstrates the ability to deal with ambiguity and diversity.	A	B	C	D	F
With assistance: <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>	Comments:				
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.	A	B	C	D	F
With assistance: <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> Independently: <ul style="list-style-type: none"> <li>performs selected psychomotor skills in a competent manner – lab setting</li> </ul> With guidance: <ul style="list-style-type: none"> <li>performs selected psychomotor skills in a competent manner – clinical setting</li> </ul>	Comments:				

**A: Excellent B: Very Good C: Good, Average, Satisfactory D: Minimal Pass F: Fail**

CONTEXT BASED LEARNING		A	B	C	D	F
15. Demonstrates competence with context based learning.						
<p>With assistance:</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>		Comments:				



Instructor Comments:

Student Comments:

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

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

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