



# UNIVERSITY OF ALBERTA COLLABORATIVE BACCALAUREATE NURSING PROGRAM

Grande Prairie Regional College Keyano College Red Deer College University of Alberta

# **NURSING 1950**

COURSE OUTLINE Fall 2008 October 27<sup>th</sup> – December 12<sup>th</sup>, 2008

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**: GPRC calendar (0 -3 -20) 161 hrs over 7 weeks

# **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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# **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
  - o 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:
  - o 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

- 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
  - o 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).

- 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:
  - o 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):
  - o 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.

- 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.

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



# Required and Recommended Resources

# **Required Resources:**

Posted on Blackboard

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

#### From NS1900:

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

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

# **Optional Resources:**

Ackley, B. & Ladwig, G. (2007). Nursing diagnosis handbook: An evidence-base guide to planning care (8<sup>th</sup> Ed.). Toronto, ON: Elsevier Mosby.

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

# **Recommended Resources:**

Nursing Drug Handbook or program for Personal Data Assistant



# **Required Learning Experiences**

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

- 1. During this course, students will have a continuous experience in the community where clients live (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).

# **Clinical Practice**

B. Hessler	Mackenzie Place (2 East)	Tues, Wed, Thurs	0700-1300
T. Evans	Grande Prairie Care Centre	Tues, Wed, Thurs	0700-1300
J. Wohlgemuth	Mackenzie Place	Tues, Wed, Thurs	0700-1300

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

Your experience 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 in QEII/GPCC.

#### Labs

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



# **Daily Seminars**

There will be individual group seminars everyday from 1300 - 1400 after the clinical shift room TBA.

# **Other Seminars:**

**November 14<sup>th</sup>** Math Calculations/Medical Terminology Exam 0900 – 1030

Fire Safety 1030 – 1130

Room A308

**November 21<sup>st</sup>** Workshop 0900 – 1600 Room J227



# Policies Related to NS 1950 Clinical Experience

Last Day to withdraw without penalty: November 27<sup>th</sup>, 2008.

# **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 2008-2009 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.

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.



# **Specialized Support and Disability Services:**

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

# **Plagiarism and Cheating:**

Please refer to your rights and responsibilities in the Grande Prairie Regional College 2008/2009 Calendar.

We expect honesty from our students. This demands that the contribution of others be acknowledged (GPRC Calendar, 2008-2009). 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.

# **Immunizations and CPR 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 118, 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.

# **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, <u>all</u> 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**

#### **Dress Code:**

• See Page 9 of the 2008-2009 Student Handbook for policy on name tags and professional dress in hospitals.

#### 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 538-7374.2 East 538-7102, GP Care Center 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 room 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; you will receive this information in a timely manner. If your assignment is changed during this clinical rotation, you will be notified by the instructor.

#### **Resident Research:**

- It is an expectation in this program that students will come prepared for clinical; therefore, client research must be done prior to clinical. You will be expected to answer appropriate questions for your resident based on the following criteria:
  - o Diagnosis
  - History
  - $\circ$  ADL's eg. mobility,
  - Any specific nursing interventions
  - Use of appropriate care plans (when you plan to do the bath, etc.)
  - o 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.



O 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:**

O 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:

- o Remember all skills done for the first time MUST be seen by the instructor; it is your responsibility to inform the instructor.
- o Practice charting will be done this clinical experience.
- o 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.
- o 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.
- o 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.
- o You need to follow GPRC and facility policies and procedures.

#### **Incident Reports/injuries:**

o 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.



# **Required Evaluation**

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

# 1. Evaluation of Nursing Practice

(75% of overall grade)

- a. Due by booked appointment.
- b. A summative evaluation of nursing practice will be completed by the student and the tutor. Form is found on Blackboard, and in the course outline.
- c. Tutor evaluations may be supplemented with input .from peers, the staff of an agency, and the client as well as the student's reflective journals.
- d. An F on any item on the ENP constitutes a failure of the ENP.

Midterm Evaluations Final Evaluations Week of November 17<sup>th</sup>-21st Friday December 12<sup>th</sup>

# 2. Patient Profile

(25% of overall grade)

a. You are encouraged to email your assignment to your tutor.

Due: November 28<sup>th</sup> @ 1600 hours.

In addition to the above evaluations, you have two Pass/Fail evaluations. **Dosage Calculations and Medical Terminology Quiz:** November 14<sup>th</sup> in Seminar

- a. Read and complete chapters three, four and five (3, 4, & 5) in Chabner, D.E. (2005). Medical terminology: A short course (4<sup>th</sup> ed). Philadelphia, PA: Elsevier Saunders.
- b. Read and complete Modules three and four (3, 4, & 5) in Osis, M. (2002). Dosage calculations in SI Units (4<sup>th</sup> ed.). Toronto, ON: Elsevier Mosby. Chapters 1-5 are testable material.
- c. You must pass the quiz to receive credit for NS 1950. It is a pass/fail quiz, 80% is required to receive a "Pass" on this test. You may have two re-writes.
- d. You will not be permitted to administer medications until the exam has been passed.

# **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 during orientation.
- 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 3 attempts they will receive an "F" in the appropriate section of the ENP and fail the course.



# **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.

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

# Total 4-Point Equivalent Values:

# Translated to Final Grade:

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



# **Grading Criteria for Nursing Courses:**

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*
В	3.0	Good
B-	2.7	Good
C+	2.3	Satisfactory
С	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 an assignment or component of a course, but must have an overall grade of C- to achieve a passing grade in a nursing course.

\*\*Note: Refer to the 2008-2009, p. 119 College calendar for further details regarding the grading policy and Progression Criteria in the Bachelor of Science in Nursing program.



# **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.

#### **Due dates:**

Journal #1 November 14<sup>th</sup> at 1600 Journal #2 December 5<sup>th</sup> at 1600

# 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 500 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.



# **Client Profile and Care Plan Guidelines**

- 1. Choose one of the residents for whom you were the primary care giver during this clinical rotation.
- 2. Using the Nursing Process, develop a plan of care for this client.

# **The Nursing Process**

#### Assessment

- Provide demographic patient data: Initials, age, gender
- List current medical diagnoses and relevant past history
- Provide a brief description of one of the resident's medical diagnoses or current health concern. Explain why the resident's current health deficit is of concern.
   What is happening physiologically in the body? What signs and symptoms pertaining to this condition is the resident experiencing? Support this section with references.
- Choose a health determinant that from your assessment is at risk. Provide your rationale for choosing this health determinant.

#### **Nursing Diagnoses**

- Identify one nursing diagnoses related to the health determinant identified above.
- Using NANDA terminology (NIC/NOC) write an actual or potential nursing diagnosis.
- Use appropriate references in this section.

# **Planning**

Develop a plan of care that would be appropriate in guiding your care given your level of education of this client.

- Develop One Goal
  - Client centred goals are specific, measurable, action focused, realistic, and time limited.
  - > They are mutually set with the client
- Expected Outcomes
  - > Describe two outcomes; specific measurable changes that are expected to occur in



response meeting your goals when providing care.

- ➤ What are the objective criteria that will demonstrate goal achievement?
- ➤ What is the time frame in which you will accomplish the outcome?

# **Implementation**

- Choose two nursing interventions or treatment that you will perform and the rationale for the interventions (supported with references).
- Plan how you will carry out your nursing care plan either directly or indirectly.
- See NIC

# **Evaluation**

- Describe how your plan worked.
- Describe why your plan worked.
- If appropriate describe why your plan did not work and what you would change in your interventions to achieve the goal.

The word limit is 1250

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



# NS 1950 Client Profile Grading Guide

_	<del>,</del>
A	Includes all elements in the assignment guidelines. Provides a concise, clear description of the client and past history. Describes and thoroughly explains one health concern integrating components of the client assessment. Identifies one health determinant at risk and provides rationale for this clinical judgment. Provides a nursing diagnosis consistent with the health determinant at risk, plan (goals and expected outcomes), implementation, and evaluation in a comprehensive manner. Supported interventions with referenced rationale. Scholarly references used (textbook, peer reviewed journals, credible website). Assignment is within the word limit.
В	Includes most of the elements in the assignment guidelines. Past history and description of the client is concise but less clear. Describes and explains one health concern integrating some components of the client assessment. Identifies one health determinant at risk. Rationale for choosing the health determinant is less well developed. Describes a general nursing diagnosis, plan (goals and expected outcomes), implementation, and evaluation clear but not comprehensive. Did not always support interventions with referenced rationale. References less scholarly (textbook, non peer reviewed journals, websites). Assignment is within the word limit.
С	Some of the key components of the assignment guidelines are missing or addressed in a superficial manner. Describes on health concern and provides a superficial integration of the client assessment. Identifies one health determinant at risk. Rationale for choosing the health determinant is superficial. Describes a general nursing diagnosis, plan (goals and expected outcomes), implementation, and evaluation but is superficial in content. Interventions supported with rationale. References less scholarly (textbook/journal may be outdated, lay website). Exceeds word limit of assignment.
D	Information is superficially addressed. Description of health concern is misinterpreted, incomplete, or superficial. An irrelevant health determinant is provided. Rationale for choosing the health determinant is provided but is vaguely/in lay person language and not accurate. Description of nursing diagnosis, plan (goals and expected outcomes), implementation, and evaluation is not clear or is incomplete. Interventions not supported with rationale. Non scholarly references/no references. Exceeds word limit of assignment.
F	Most of the key elements of the assignment are missing. Writing indicates an inability to carry out the assignment directions. Assignment not handed in/plagiarized. Exceeds word limit of assignment.



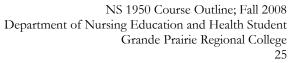
# ORAL MEDICATION OSCE

Stu	dent:_	Examiner:	
Dat	te:		
Yes	s No		
		1. Washes hands	
		2. Checks doctor's order	
		3. Calculates the correct dose.	
		4. Takes medication and checks 3 times for the 5 rights	
		5. Performs 2 patient checks before giving the medication (arm	
		band and have client state their name), assesses for drug allergies.	
		6. States would assess if there are contraindications for oral	
		medications such as swallowing difficulties, GI problems, gastric	
		suctioning or cognitive deficits.	
		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.	
		8. Administers medication using medical asepsis	
H		9. Stays until client has swallowed medication	
Ħ		10. Signs and returns MAR sheet to appropriate chart	_
		11. Charts in Nurses notes the assessment for giving the medication.	
	<u> </u>		
то	TAL:		
	11124	Pass Requirement: 8/11	
		11	
Ins	tructo	or Comments:	
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# Nursing 1950 Evaluation of Nursing Practice

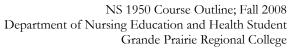
Stude	nt Name
Tutor	Clinical Placement:
Overa	ıll Grade
A	Student consistently exceeds the expectations of each of the bulleted items on the ENP.
В	Student occasionally exceeds the expectations of each of the bulleted items on the ENP.
C	Student consistently meets the expectations of each of the bulleted 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	В	С	D	F
PROFESSIONAL RESPONSIBILITY AND ETHICAL PRACTICE					
1. Practices within the legal and ethical standards established by the College and					
Association of Registered Nurses of Alberta and the Canadian Nurses Association, and					
according to legislated scope of practice, and provincial and federal legislation.					
Independently:	Cor	nmer	nts:		
<ul><li>demonstrates integrity</li></ul>					
<ul> <li>demonstrates responsibility and accountability</li> </ul>					
<ul> <li>demonstrates respect for client's values, beliefs and rights</li> </ul>					
With assistance:					
<ul> <li>demonstrates application of legal and ethical standards:</li> </ul>					
<ul> <li>practices according to policies and procedures of host agencies and</li> </ul>					
educational institution					
<ul> <li>uses knowledge of scope of practice and professional legislation and Code</li> </ul>					
of Ethics					
o confidentiality					
<ul> <li>uses informed consent</li> </ul>					
<ul> <li>prepares for clinical practice to provide safe, competent care</li> </ul>					
<ul> <li>demonstrates commitment to the values of the profession of nursing and</li> </ul>					
support of professional development of colleagues					





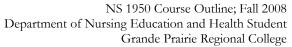
2. Engages in strategies for social and political action at a beginning level	Α	В	C	D	F
With assistance:	Cor	nmer	its:		
<ul> <li>differentiates own values/needs/rights /obligations from values/needs/rights/</li> </ul>					
obligations of others					
<ul> <li>discusses formal and informal power structures in the context of social /</li> </ul>					
political action in nursing situations					
<ul> <li>identifies nursing issues requiring social and political action</li> </ul>					
<ul> <li>identifies programs which have arisen from social / political action</li> </ul>					
<ul> <li>discusses the role of the individual nurse in social and political action</li> </ul>					
<ul> <li>identifies role in existing programs</li> </ul>					
<ul> <li>discusses the role of professional nursing organizations in social and political</li> </ul>					
action					
o protection of public					
o position statements					
<ul> <li>describes the planning process for engaging in social and political action</li> </ul>					
<ul> <li>funding sources (re: existing programs)</li> </ul>					
<ul> <li>identifies strategies and resources for social and political action.</li> </ul>					
3. Demonstrates skills and attitudes necessary for life-long learning .	Α	В	С	D	F
Independently		nmer	its:		
o demonstrates personal responsibility for learning					
With assistance:					
o identifies strengths and limitations of own competence, seeking assistance when					
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> </ul>					
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> </ul>					
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <li>seeks and is receptive to feedback</li> </ul>					
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <li>seeks and is receptive to feedback</li> <li>act on feedback</li> </ul>					
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <li>seeks and is receptive to feedback</li> <li>act on feedback</li> <li>assumes primary responsibility for attaining and maintaining competence</li> </ul>	A	В	С	D	F
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <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>	A	В	С	D	F
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <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> KNOWLEDGE BASED PRACTICE		B		D	F
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <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> <li>KNOWLEDGE BASED PRACTICE</li> <li>Applies a critical thinking approach to nursing.</li> </ul>				D	F
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <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> <li>KNOWLEDGE BASED PRACTICE</li> <li>Applies a critical thinking approach to nursing.</li> <li>With assistance:</li> <li>applies critical thinking strategies in in developing sound clinical judgment in relation to health promotion and disease and injury prevention</li> </ul>				D	F
<ul> <li>identifies strengths and limitations of own competence, seeking assistance when necessary</li> <li>demonstrates an openness and receptivity to change</li> <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> <li>KNOWLEDGE BASED PRACTICE</li> <li>Applies a critical thinking approach to nursing.</li> <li>With assistance:</li> <li>applies critical thinking strategies in in developing sound clinical judgment in</li> </ul>				D	F



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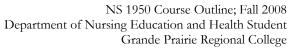
5. Applies nursing knowledge, including knowledge from the arts, humanities, medical sciences, and social sciences into nursing practice.	A	В	С	D	F
With assistance:	Cor	nmei	nts.		
<ul> <li>uses selected areas of knowledge related to biological, psychological, socio-cultural</li> </ul>			105.		
and spiritual dimensions of the human response to stable variations in health					
uses selected areas of knowledge related to scope of practice and professional					
legislation in nursing practice.					
6. Demonstrates evidence based practice.	A	В	С	D	F
With assistance:	Cor	nmei	nts:		•
o utilizes credible resources (research studies, experts, and others)					
o examines research findings related to nursing situations					
o describes the significance of research to practice (research studies, experts, and					
others)					
o identifies nursing practice problems that require investigation.					
7. Applies nursing and other relevant models/theories in the professional practice of	A	В	C	D	F
nursing.					
With assistance:	Cor	nmei	nts:		
o discusses the use of nursing models / theories / metaparadigms					
o identifies models / theories from other disciplines and their application into nursing					
o explores the application of selected nursing models / theories into nursing practice.					
8. Demonstrates competence in health care informatics.	A	В	C	D	F
With assistance:	Car				
	Cor	nmei	nts:		
<ul> <li>uses a variety of selected information technology and other technology to support</li> </ul>	Coi	nmei	nts:		
all scholarly activities and clinical practice.	Col	nmei	nts:		
all scholarly activities and clinical practice. PROVISION OF SERVICE TO PUBLIC	Col	nmei B	nts:	D	F
all scholarly activities and clinical practice.  PROVISION OF SERVICE TO PUBLIC  9. Applies concepts and principles of primary health care (accessibility of health	Col	1	T	D	F
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all scholarly activities and clinical practice.  PROVISION OF SERVICE TO PUBLIC  9. Applies concepts and principles of primary health care (accessibility of health services, use of appropriate technology, individual and community participation, increased health promotion and disease prevention, intersectoral collaboration).  With assistance:  applies principles of primary health care to with healthy individuals across the lifespan  applies knowledge of health determinants in client situations  applies selected health promotion activities with individuals  develops professional skills needed for taking action (eg. teaching/learning)  10. Demonstrates caring relationships in professional situations.  With assistance:  recognizes the uniqueness, worth and dignity of self and others  demonstrates caring behaviors in interpersonal activities with clients, peers and others in the health care setting  demonstrates ability to engage in caring relationships with clients in nursing practice (boundaries):	Cor	B	C C		



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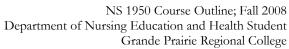
11. Collaborates with clients, community agencies, community members, and members of other disciplines in a variety of settings.	A	В	С	D	F
With assistance:	Cor	nmei	nts.		
<ul> <li>encourages client participation, choice and control</li> </ul>			10.		
<ul> <li>encourages colleague participation, choice and control</li> </ul>					
develops cooperative relationships with colleagues, community					
members, community agencies and members of other disciplines					
interacts with clients with stable variations in health					
<ul> <li>with assistance, engages in inter-professional interaction</li> </ul>					
12. Demonstrates beginning leadership, management and administrative skills.	A	В	С	D	F
With assistance:	Coı	nmei	nts:		
<ul> <li>uses effective time management strategies in coordinating client care</li> </ul>					
<ul> <li>describes leadership and management roles and competencies</li> </ul>					
<ul> <li>uses decision-making processes</li> </ul>					
<ul> <li>effectively leads a small group</li> </ul>					
<ul> <li>performs an accurate appraisal of self and others</li> </ul>					
<ul> <li>effectively follows quality and risk management processes to enhance nursing</li> </ul>					
practice					
<ul> <li>identifies principles of delegation (right: task, circumstance, person, direction,</li> </ul>					
supervision).					
13. Demonstrates the ability to deal with ambiguity and diversity.	A	В	C	D	F
With assistance:	Coı	nmei	nts:		
<ul> <li>identifies effects of ambiguity and diversity in all learning environments</li> </ul>					
<ul> <li>identifies ambiguity and diversity in selected nursing situations</li> </ul>					
<ul> <li>identifies ambiguity and diversity in selected nursing situations</li> <li>identifies own pattern of dealing with the effects of ambiguity and diversity</li> </ul>					
<ul> <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</li> </ul>					
<ul> <li>identifies own pattern of dealing with the effects of ambiguity and diversity</li> </ul>					
<ul> <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</li> </ul>	A	В	С	D	F
<ul> <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>	A	В	С	D	F
<ul> <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> <li>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.</li> </ul>	A	В	С	D	F
<ul> <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> <li>14. Demonstrates competence in clinical reasoning in relation to verbal and written communication, psychomotor skills, nursing process, priority setting, client education,</li> </ul>		B		D	F
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CONTEXT BASED LEARNING	A	В	С	D	F
15. Demonstrates competence with context based learning.					
With assistance:	Cor	nmei	nts:		
<ul> <li>describe the components of context based learning</li> </ul>					
<ul> <li>self directed learning</li> </ul>					
o group process					
<ul> <li>CBL process</li> </ul>					
<ul> <li>use the nursing process to plan nursing care for selected clients</li> </ul>					
<ul> <li>selected assessment skills</li> </ul>					
<ul> <li>problem identification</li> </ul>					
o outcomes					
o interventions					
o evaluation					
<ul> <li>effectively use group process to facilitate learning of the group</li> </ul>					
o respect for the values and beliefs of others					
<ul> <li>responsibility and accountability for the learning of the group</li> </ul>					
o group roles					
o caring behaviors					
o self directed learning					
<ul> <li>influencing factors</li> </ul>					
<ul> <li>effectively use critical thinking in the group</li> </ul>					
<ul> <li>brainstorming</li> </ul>					
<ul> <li>exploring (creativity, depth, breadth and relevancy)</li> </ul>					
<ul> <li>sources of information</li> </ul>					
<ul> <li>use communication skills to enhance the context based learning processes</li> </ul>					
<ul> <li>sharing personal information</li> </ul>					
o articulation					
o clarity					
o conciseness					
o relevancy					
<ul> <li>seeking and providing opinions, information and direction</li> </ul>					
<ul> <li>receiving and giving feedback</li> </ul>					
<ul> <li>use writing skills to enhance the context based learning processes</li> </ul>					
o legibility					
o appropriateness					
o clarity					
o conciseness					
o relevancy					



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mon acan	Commencia	Э.

<b>Student Comments:</b>
Date:
Instructor Signature:
Student Signature:
<ul> <li>The student's signature indicates that the student has read the evaluation.</li> </ul>