

# UNIVERSITY OF ALBERTA COLLABORATIVE BACCALAUREATE NURSING PROGRAM

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

MAY 3 1 2001

# NURSING 1950 COURSE OUTLINE Winter 2001

## Course tutors:

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### **CUNIVERSITY OF ALBERTA COLLABORATIVE BSCN PROGRAM, 1999**

All rights reserved. No part of this course outline may be reproduced in any form or by any means without the publisher's written permission. Approved: April 19, 2000 Nursing 1950 - Nursing Practice II \*6 (fi 12) (second term, 0-3s-24c in 7 weeks).

Practice includes health status assessment of chents 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. Pre-requisites: NURS 190, NURS 191.

## COURSE HOURS:

Lecture/Seminar: 14

Lab/Clinical: 175

# COURSE DESCRIPTION:

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

### COURSE OBJECTIVES:

Upon completion of Nursing 1950, the nursing student will be able to:

- Applies, at a beginning level, principles of primary health care.
- Explore with the client their pattern of dealing with ambiguity and diversity.
- Identify ambiguity and diversity in practice settings.
- Demonstrate professional behavior in nursing practice; respect, communication, responsibility, self-awareness.
- Demonstrate beginning application of legal and ethical standards in selected nursing situations; prepares for clinical practice, maintains confidentiality, uses informed consent, practices according to policies and procedures of clinical agencies.
- Demonstrates establishment of helping relationships with clients: demonstrates respect, sensitivity and caring.
- Demonstrate personal responsibility for learning; identify strategies to address strengths and weaknesses.
- With guidance, examines research findings and describes the relevance of research to nursing practice
- 9. With guidance, applies a selected model/theory in nursing practice
- 10. With guidance, applies beginning critical thinking strategies of insight, creative and reflective thinking, to examine health promotion and primary prevention activities.
- Utilize selected areas of knowledge related to: bio-psycho-socio-cultural-spiritual factors in interacting with healthy individuals and families across the lifespan.
- Develop cooperative relationships with colleagues, clients, community members, and community agencies; valuing.

- 13 Describe leadership and manager roles.
- Demonstrate beginning ability in performance appraisal of self.
- Differentiate between formal and informal power structures within the practice setting.
- Demonstrate competence in selected skills required for nursing care of clients experiencing stable variations health.

# REQUIRED TEXTS:

Bickley, L.S. (1999). Bate's guide to examination and history taking (7th ed.) Philadelphia, PA: Lippincott.

Canadian Nurses Association. (1997). Code of ethics for nurses. Ottawa, ON: Author

Pilliteri, A. (2000). Maternal and child health nursing. Care of the childbearing and childrearing ramily (3rd ed.). Philadelphia, PA: Lippincott.

Potter, P.A. and Perry, A.G. (1997). Canadian fundamentals of nursing. St. Louis, MO Mosby.

Skillen, L. and Day, R. (1999). <u>Health assessment laboratory syllabus</u>. Edmonton, AB-University of Alberta.

Smeltzer, S.C. and Bare, B.G. (2000). <u>Brunner & suddarth's textbook of medical-surgical nursing</u> (9<sup>th</sup> ed.). Philadelphia, PA: Lippincott.

Stewart, M.J. (2000). <u>Community nursing: Promoting Canadian's health</u> (2<sup>nd</sup> ed.). Toronto, ON: W.B. Saunders.

Wright, L.M. and Leahey, M. (2000). Nurses and families: A guide to family assessment and intervention (3rd ed.). Philadelphia, PA: F.A. Davis.

# PROGRESSION CRITERIA:

- A. Students must complete theory and practice components of nursing courses to receive credit. Students who have not received a pass in the clinical/laboratory portion of a nursing course are not given credit for the course and must repeat both the clinical and non-clinical portions of the course. The clinical component must be completed for credit to be granted.
- B. A student who is absent more than two clinical days in one clinical nursing course may need to make up lost time before being allowed to continue in the program. Absences

from the clinical site may result in the instructor's being unable to evaluate the student's clinical performance, resulting in a grade of F.

- C. Whenever a student's clinical performance is considered marginal in a nursing course, the student's total academic and clinical performance in the program is reviewed at the end of each term and considered in determining continuation in the program.
- D. An instructor, in consultation with the Chair, may immediately deny assignment of a student withdraw a student from; or vary terms, conditions or a site of a practicum/clinical placement if the instructor has reasonable grounds to believe that this is necessary in order to protect the Public Interest

# PROFESSIONAL DRESS:

Students are expected to abide by the dress code of the particular agency where their clinical experience is taking place. It is expected all students will wear a Grande Prairie Regional College name tag.

# LATE ASSIGNMENTS:

- All assignments and course evaluation strategies are required to be completed by the time and date specified in the course outline.
- 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.
   Five percent (5%) per class day will be deducted from the total value of the
   assignment for each class day the assignment is late. For example, a scholarly paper,
   valued at 25% of the final grade, and handed in one class day late, will be valued at
   23.75% of the final grade. Therefore, the instructor will assign the paper mark out of
   23.75 and a perfect paper would attain a mark of 23.75 only.

# CLINICAL HOURS:

Total clinical hours for this course is 175 hours plus 14 hours of seminar. Each clinical
site has a somewhat different allocation of hours to total of 175. Your clinical tutor will
provide an outline of the clinical hours required by each clinical site during the orientation
to the course.

- The total clinical hours will include a two (2) day Palliative Care Workshop offered by
  Mistahia Health Kegion on March 20 and 21, 2001. Attendance at this workshop is
  compulsory and counts for two (2) eight hour clinical days. The cost of the workshop is
  \$10,00 per student. Details for the workshop and the brochure will be available at least 2
  weeks before the workshop.
- As the focus of NS 1950 is health promotion for well families in community settings, and long-term care facilities are an extension of Continuing Community Care, the Palliative Care Workshop offers an appropriate professional development opportunity for students.
- There are also two (2) seminar hours scheduled each week for a total of 14 hours. The time, place, etc of these hours will vary with the clinical site and will be negotiated with the instructor during orientation.

# REQUIRED LEARNING EXPERIENCES AND EVALUATION:

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

#### NURSING PRACTICE:

Nursing practice will take place in a three types of settings, public health agencies, non-traditional community sites, and long-term care facilities. Over the course of Nursing 1910 (taken in the fall semester) and Nursing 1950 each student will have a nursing practice experience in each of these areas. Nursing practice experience in each area, accompanied by the appropriate laboratory learning experiences will total approximately 87.5 hours.

Nursing practice will be evaluated by means of the following.

# 1. Reflective Journal/Learning Plan/Field Notes: Value: Varies: See Table

- Students will develop a learning plan to explore personal learning objectives compatible
  with the experiences of this course to guide their nursing practice in NS 1910.
   Family/Home visiting is to be included in the Learning Plan.
- A Reflective Journal will be completed each week wherein students reflect upon their clinical experience and how it is effecting their efforts to address their learning goals.
- Reflective Journals must indicate critical thinking and problem solving related to the experience and their learning plan.

Value: Varies: See Table

Value: Varies: See Table

 Criteria and Marking Guide for the Learning Plan and Reflective Journal/Field Notes are outlined in Appendix A.

# 2. Family/Home Visiting:

Family/Home visiting, begun in NS1900, will continue during NS 1950. By the completion of Nursing 1950 students will have made a total of 10-12 visits to a family.

Journal entries related to these visits will be made in your Reflective Journal after each visit. Visits will also be discussed in weekly Seminars.

Family Assessment: By the completion of the Home Visiting experience students will complete a detailed assessment of their family, following the form provided.

Marking criteria for evaluation of Family/Home Visiting will be provided to you at the orientation for this course.

### 3. DIRECT CLINICAL OBSERVATION:

A written summative evaluation of Nursing Practice will be completed by the student and the instructor at the end of each practice experience.

This will be accomplished through observation assessment and evaluation of the student during clinical practice. Evaluations will be made by the instructor and will be supplemented with input from peers, the staff of an agency, and the client.

### A. Essential

Over the seven weeks students will have a continuous experience in two community settings where clients live and/or in community agencies (non acute) where services to clients are offered. The experience will include:

- Nursing practice with individuals across the lifespan, in the context of family.
- 2 Participating in home visits, demonstrating critical thinking in the use of the nursing process related to health promotion.
- Participating in activities of a community agency in developing knowledge of agency, assessing clients, and engaging in health promotion activities.

Examining the role of a registered nurse.

Students are expected to implement previously learned nursing skills,

The evaluation criteria and form are included in Appendix B

### ASSIGNMENTS

Value: Varies (See Below and Table)

Family/Home Visits and Family Assessments:

Value: 20 % of Final Grade

- Family/Home Visiting Journals: Journals must be handed in to your clinical tutor by March 9, 2001. The complete journal (that is all entries from the initial one) need to be handed in. For those students not in a clinical rotation at this time, please hand the journals in to Dorothy Eiserman.
- Subsequent Journals will be handed in to your clinical tutor weekly.
- 3. The completed journal and the Family Assessment Assignment are due on April 12, 2001

Nursing theory will be evaluated using the following written materials. Assignments are specific to the agency where the clinical experience is taking place.

### Public Health:

- Students will complete a Community Assessment using the Windshield Survey technique.
- A Reflective Journal including the Learning Plan will be kept.

## Non-Traditional Community Placement:

- Students will complete a Health Promotion Project
- 2. A Reflective Journal including the Learning Plan will be kept

## Long-Term Care Setting:

1. A Learning Plan will be developed and updated.

### VALUES FOR REQUIRED LEARNING EXPERIENCES AND ASSIGNMENTS

AGENCY	LEARNING EXPERIENCE	VALUE
Non-traditional Community Agency	Health Promotion Project	10%
Non-traditional Community Agency	Reflective Journal/Learning Plan	15%
Non-traditional Community Agency	Direct Clinical Observation	15%
Public Health Unit	Community Assessment	10%
Public Health Unit	Reflective Journal/Learning Plan	15%
Public Health Unit	Direct Clinical Observation	15%
Long Term Care Facility	Learning Plan	20%
Long Term Facility	Direct Clinical Observation	20%

NOTE: Information related to developing Clinical Learning Plans and writing Reflective Journals are attached in Appendix B. These materials were also provided in NS 1910.

# LEARNING LABORATORY:

### Public Health:

- I. Community Assessment
- 2 Post-natal Baby Assessment

# Non-Traditional Community Settings:

1. Health Promotion and Client Education for Groups

# Long Term Care Settings:

- 1. ADL (Activities of Daily Living), Nutrition (Feeding), Nurse Safety (Back Care)
- 2. Comfort and hygiene
- Ambulation and transfers: aids for mobility (canes, walkers, lifts, wheelchairs), Assessment of ROM exercises and safety.
- 4. Environmental Precautions (emergency procedures, WHMIS)

NOTE: Scheduling for labs will be provided by your clinical tutor.