



**DEPARTMENT OF NURSING EDUCATION AND HEALTH STUDIES**  
**COURSE OUTLINE – WINTER 2020**

**NS2060 (AC2, AC4): Community Nursing Practice – 6 (0-0-32c) UT 224 Hours 7 Weeks**

<b>INSTRUCTOR:</b>	<b>Bonny Townsend (Course Leader)</b>	<b>PHONE:</b>	<b>780-539-2213</b>
<b>OFFICE:</b>	<b>J223</b>	<b>E-MAIL:</b>	<a href="mailto:btownsend@gprc.ab.ca"><b>btownsend@gprc.ab.ca</b></a>

<b>INSTRUCTOR:</b>	<b>Karen Oostra RN, MSN</b>	<b>PHONE:</b>	<b>780-539-2449</b>
<b>OFFICE:</b>	<b>H205</b>	<b>E-MAIL:</b>	<a href="mailto:koostra@gprc.ab.ca"><b>koostra@gprc.ab.ca</b></a>

<b>OFFICE HOURS:</b>	<b>Varies. Consult individual instructor.</b>
--------------------------	---

**CALENDAR DESCRIPTION:**

Students will have the opportunity to apply concepts of community health nursing. Nursing practice will include health assessment and interventions with child-bearing families. Students will develop competence in both family and community assessments, the use of therapeutic communication skills and the planning, implementation and evaluation of community nursing interventions.

**PREREQUISITE(S)/COREQUISITE:**

Prerequisites: NS2150, NS2015, NS2025

Co-requisite: NS2055

## **REQUIRED TEXT/RESOURCE MATERIALS:**

Ackley, B.J., & Ladwig, G.B. & Makic, M (2017) *Nursing diagnosis handbook: An evidence-based guide to planning care* (11<sup>th</sup> edition). Maryland Heights, Missouri: Mosby Elsevier.

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed., 3rd printing). Washington, DC: Author.

Balzer-Riley, J. (2013). *Communications in nursing* (7th ed.). Toronto, Canada: Mosby.

**Chow, J., Ateah, C.A., Scott, S.D., Scott-Ricci, S., & Kyle, T. (2013). *Canadian maternity and pediatric nursing*. Philadelphia: Lippincott, Williams, & Wilkins.**

Drug Guide: Any current drug guide or electronic drug application and the electronic “Compendium of Pharmaceuticals and Specialties (e-CPS) available through the library at <https://www.myrxtx.ca/search>

Jarvis, C., Browne, A.J., MacDonald-Jenkins, J., Luctkar-Flude, M. (2014). *Jarvis physical examination & health assessment* (2<sup>nd</sup> Canadian edition). Toronto, Canada: Elsevier.

Jarvis, C., Jarvis, C., & Tarlier, D. (2014). *Student laboratory manual for Jarvis physical examination and health assessment, Canadian edition, 2<sup>nd</sup> edition*. Toronto, Canada: Elsevier.

**Pagana, K.D., Pagana, T. J., & Pike-MacDonald, S. A. (2018). *Mosby’s Canadian manual of diagnostic & laboratory tests* (2<sup>nd</sup> ed.). Toronto, Canada: Elsevier Mosby.**

**Perry, A., Potter, P., & Ostendorf, W. (2018). *Clinical nursing skills and techniques* (9<sup>th</sup> ed.). St. Louis, Missouri: Elsevier.**

Or

**Perry, A., Potter, P., Ostendorf, W. & Cobbett, S. (2020). *Canadian clinical nursing skills and techniques*. Toronto, ON: Elsevier.**

Potter, P. A., Perry, A.G., Stockert, P.A., & Hall, A.M. (Eds.). (2019). *Canadian fundamentals of nursing* (6<sup>th</sup> Cdn. ed.) (B. J. Astle & W. Duggleby, Cdn. Adapt.). Toronto, ON: Elsevier Canada.

SafeMedicate software.

## **OPTIONAL TEXTS:**

**Perry, S. E., Cashion, K., Lowdermilk, D. L., & Alden, K. R. (2012). *Clinical companion for maternity & newborn nursing* (2nd ed.). St. Louis: Mosby, Inc.**

## **DELIVERY MODE(S):**

Clinical experiences including some pre- and post- conferences. Resources are posted on Moodle.

## **COURSE OBJECTIVES:**

1. Demonstrate, independently, the ability to practice in accordance with Year 4 competencies, as described in the document entitled: *Graduate Competencies and Year-End Outcomes Condensed Version 2017*.
2. Demonstrate application of legal and ethical standards in nursing practice settings.
3. Demonstrate, independently, the ability to use professional and therapeutic communication skills to collaborate with healthy clients, clients experiencing chronic or less acute variances in health across the life span in community based setting, homes, and some acute care centres.
4. Demonstrate, independently, the ability to manage health promotion and primary prevention activities to apply health counselling skills and teaching/learning principles.
5. Demonstrate understanding of selected theories/models related to community (i.e. change theory, McGill model, CFAM/CFIM) and their relevance to community nursing.
6. Demonstrate, independently, the ability to perform selected health assessment skills with healthy individuals across the lifespan in the context of family within a community, and demonstrate the ability to perform assessment of the childbearing family.
7. Apply concepts related to health promotion, primary prevention, support, restoration, and rehabilitation in selected practice settings with clients.
8. Demonstrate knowledge of the organization of health care in Canada (i.e., health care delivery systems, ideologies, primary health care model, health promotion, disease and injury prevention, and health determinants).
9. Demonstrate, independently, the processes of self-directed learning, critical thinking, and group process in learning activities.
10. Demonstrate an understanding of key patient safety concepts including communication, teamwork, environmental and human factors, safety risks and adverse events disclosure.
11. Demonstrate understanding of interdisciplinary/interprofessional collaboration.
12. Apply nursing knowledge and knowledge from other disciplines related to biological, psychological, sociological, developmental, cultural and spiritual factors in nursing practice with clients experiencing chronic and less acute variances in health across the life span.

## **LEARNING OUTCOMES:**

### **At the end of the course the student will be able to:**

1. Practice interprofessional competencies.
2. Apply the principles of primary health care and health promotion with families, aggregates/groups and communities.
3. Demonstrate safe nursing practice.
4. Develop plan of care guided by models and theories relevant to nursing.
5. Apply the nursing process in collaboration with clients in an acute or community settings.
6. Demonstrate nursing practice that exemplifies inclusiveness, social justice and equity.
7. Develop nursing practice that incorporates the principles of teaching and learning.
8. Appraise information to guide nursing practice.

9. Demonstrate advocacy and political action to support health public policy and community development.
10. Integrate local, provincial, national and international health initiatives into nursing practice.
11. Evaluate leadership skills and perspectives needed for practicing in and influencing complex care needs and environments.

## **TRANSFERABILITY:**

“This course is part of the block transfer agreement with the University of Alberta in the Collaborative BScN Program. Admission to the fourth year of the Program and registration at the U of A will be contingent upon confirmation by the Faculty of Nursing that the first three years of the Program have been completed with satisfactory academic standing. For promotion to Year 4 at the U of A, a student is required to pass all previous courses and obtain a minimum cumulative GPA of 2.0 on a 4.0 point scale in the first three years of the program. If these conditions are met, the student will be granted a block transfer of work completed at GPRC to the U of A record.”

**\*Warning:** Although we strive to make the transferability information in this document up-to-date and accurate, **the student has the final responsibility for ensuring the transferability of this course to Alberta Colleges and Universities.** Please consult the Alberta Transfer Guide for more information. You may check to ensure the transferability of this course at Alberta Transfer Guide main page <http://www.transferralberta.ca> or, if you do not want to navigate through few links, at <http://alis.alberta.ca/ps/tsp/ta/tbi/onlineSearch.html?SearchMode=S&step=2>

**\*\* Grade of D or D+ may not be acceptable for transfer to other post-secondary institutions. Students are cautioned that it is their responsibility to contact the receiving institutions to ensure transferability**

### **Medication Calculation.**

It is a requirement of NS2060 that you achieve 90% on your SafeMedicate/edose medication calculation exam in order to be allowed to practice in the clinical setting. If 90% is not achieved on the first exam, two re-writes will be granted. The student must pass this exam to continue in this course. Failure to achieve a passing grade on the SafeMedicate medication calculation exam by the end of the 3 attempts [Initial exam and 2 rewrites] will result in the student being asked to withdraw from the course. **Refer to Course Schedule for Dates, Times, and Rooms.**

## EVALUATIONS:

1. **Evaluation of Nursing Practice (ENP).** Nursing practice must be evaluated using the ENP tool found on Moodle and in the appendices of the course outline. **(80%).**
  - **Formative Evaluations will occur throughout Clinical and a written summative Evaluation of Nursing Practice will be completed by the student and the instructor(s) at the end of the experience in each clinical area:**
    - Postpartum
    - Public Health
  - Students will e-mail their completed ENP to the appropriate instructor at the end of each 3-week rotation **[due January 29<sup>th</sup> by 1900hrs and February 26<sup>th</sup> by 1900hrs]**. Remember to include your hospital based experiences (NICU, Pediatrics, Labour & Delivery) as well as your experiences teaching in schools if they occurred in the 3 week period.
  - Evaluation of student's clinical performance will be accomplished through observation, assessment and evaluation of the student during nursing practice. Evaluations will be made by the instructor and may be supplemented with input from the student, the staff of an agency/unit, and the clients.
    - An ENP grade will be assigned at the end of each 3-week rotation. **The Final ENP grade will be an AVERAGE of the two ENP's;** your performance in all Maternal/Child areas of practice: **1. Postpartum, 2. Public Health/School teaching experiences and will also include Hospital based experiences whenever they occur.**
    - **ENP's will be completed by your instructors and sent to you by e-mail.**
    - **After receiving your ENP; if you would like to discuss your grade; you may e-mail the instructor to set up a date and time for an appointment.**

**\*\*Refer to the ENP in Appendices\*\***

**In order to pass NS2060, students must demonstrate safe, ethical nursing practice; professional behavior and complete all of the required activities [Reflective Journal, Concept Maps (NICU, Peds, L&D), School Lesson Plan, and 2 Self-Evaluations of Nursing Practice (ENP)]. Students MUST pass the ENP in order to pass the course. If you receive a grade of "F" in any of the ENP criteria it constitutes a "clinical failure," as this reflects unsafe, unprofessional, and/or unethical nursing practice.**

**Reflective Journal (Incorporated into ENP) Due Date: Feb. 7 by 1900hrs**

Nurses reflect on their practice almost every day. One way nurses maintain their ability to provide high-quality care to their clients is to review aspects of their practice and determine what worked and what could have been done differently.

For the purposes of this journal, students will be required to choose **ONE INCIDENT** that occurred in any of the NS2060 experiences. It is not intended to be a commentary of a clinical shift, but rather an experience that allowed you to gain an understanding of how this experience has contributed to your own knowledge, experience and clinical practice (i.e. reflective nursing practice).

This **Journal will be used as part of your ENP** and will not be given a formal grade.

It is an expectation that this journal will be **3-4 pages type written (excluding title page and References page.)** You may choose to relate your experiences to the literature, but this is not required. Please maintain patient/staff/peer confidentiality when writing your journal.

You may find it helpful to use these questions in your journal as you reflect on a case that went particularly well or a situation that was difficult for you. The analysis can help you identify strengths or areas to work on in your practice.

1. What was the setting that you were in?
2. What happened? What were the facts? Be objective (To ensure confidentiality, initials or a description should be used).
3. What went well? What did you find difficult? What surprised or puzzled you?
4. How did you feel?
5. What was your role in the incident?
6. How did you feel about your choices? Why?
7. Were there any extenuating circumstances that contributed to the incident?
8. What were the important elements that surrounded the incident? Were you part of the problem, part of the solution or a by-stander in the incident?
9. What did you learn from the incident? What would you do differently in the future? What do you need to know to assure a better outcome?
10. Identification of strength(s) or area(s) to work on in your practice.
11. What would you teach your peers if they were in a similar situation?
12. Why is it important to strengthen your professional identity?

**Concept Map Activity.**

Your attendance at your hospital based experiences: Labour and Delivery (2 Shifts), Neonatal Intensive Care (NICU) and Pediatrics will be evaluated through the creation of a Concept Map. A suggested template is posted on Moodle. This Concept Map should be created during your shift and should be based on one patient in your care that day. It is meant to stimulate Clinical Reasoning as you identify and connect the various aspects of care such as pathophysiology, pharmacology, lab values, assessments and interventions. Use it to ask questions of the nurses you are working with. Submit it to your instructor with your ENP. These 4 submissions will be used to inform your ENP.

## 2. Research Poster Assignment (20%) Due Feb. 14, 2020 at midnight.

The **purpose** of this assignment is to perform a **literature review** and create a **research poster**.

**You will work in pairs.** One grade will be assigned for the pair.

### **Assignment Guidelines:**

1) PICO Question: You will be provided with a topic and one current research article. Once you have a good understanding of the topic, you will develop a PICO (population, intervention comparison, outcome) question to research. Use this link to help form your question: <http://libguides.siue.edu/c.php?g=333872&p=2244149> Students must submit their PICO question for feedback and approval prior to the start of their assignment and no later than 0830 hrs on January 17<sup>th</sup>.

2) Literature Search: Conduct a literature search to find articles, which will answer your PICO question. You will need to generate a list of search terms and use them to search databases such as CINAHL. You must save your search terms as they will form part of your “Methods” section of your poster. You must also note what types of studies you are excluding. Retrieve at least 6 studies that are directly related to your PICO question. Studies must be peer reviewed and current (preferably within the last 5 years, none older than 10 years). Each student in the pair should be responsible for reviewing 3 of the studies.

3) Literature Review: You will need to work together on this section to combine the findings of all 6 studies. Create a table including the citation (authors), sample size, intervention, what was measured, how it was measured and the results (+/-). This should serve as a clear summary of findings for someone who has not read the articles.

4) Knowledge Synthesis: Looking at the findings of all the studies together, what can be said about the answer to the PICO question? How can this evidence be used by nurses in their care for individuals or populations or for nurse education? How can this evidence be used in nursing practice? Identify areas for further research.

**\*\*Refer to the Grading Rubric in Appendices \*\***

### **Assignment Policy:**

#### Assignment Submission Policy

- Journals should be submitted to your instructor via email
- Evidence Informed Practice Assignments should be submitted to the Assignment Forum on Moodle

#### Late Assignment Policy

- All assignments are expected to be passed in at the date, time and place they are due.
- Extensions on assignments may be granted and must be negotiated with the instructor prior to the due date and with a date specified for late submissions.

- A penalty of one alpha grade for each calendar day (24 hours) that an assignment is submitted after the due date and time will be deducted from the final mark. Every subsequent 24-hours elapsed will result in the deduction of an additional alpha grade.

For example:

- A late assignment due on Friday at 0830hrs must be received no later than Saturday at 0830hrs to have only one alpha grade deducted.
- An assignment graded at (B+) would receive an adjusted grade of (B) if handed in one calendar day late.

### **Labs:**

Students are expected to wear scrubs or nursing uniforms to all labs. You will not be permitted to wear scrubs to other classes. A 10-minute allowance will occur at the end of the lab to allow time for changing clothes.

### **Attendance:**

Attendance at orientation, labs, and clinical is expected; absence will jeopardize successful completion of the course and may result in course failure.

A student who is absent more than **two clinical days** in one clinical nursing course may need to make up lost time at the tutor's discretion (time permitting) in order to progress in the program.

**More than two clinical absences from the clinical site may result in the instructors' being unable to evaluate the student's clinical performance, resulting in a grade of F.**

### **Professional Dress:**

Students are expected to abide by the dress code of the particular agency where their clinical experience is taking place.

**\*\*All students will wear a Grande Prairie Regional College and Alberta Health Services picture ID\*\***



**GRADING CRITERIA:**

<b>GRANDE PRAIRIE REGIONAL COLLEGE</b>			
<b>GRADING CONVERSION CHART</b>			
<b>Alpha Grade</b>	<b>4-point Equivalent</b>	<b>Percentage Guidelines</b>	<b>Descriptor</b>
<b>A<sup>+</sup></b>	<b>4.0</b>	<b>90 – 100</b>	<b>EXCELLENT</b>
<b>A</b>	<b>4.0</b>	<b>85 – 89</b>	
<b>A<sup>-</sup></b>	<b>3.7</b>	<b>80 – 84</b>	<b>VERY GOOD FIRST CLASS STANDING</b>
<b>B<sup>+</sup></b>	<b>3.3</b>	<b>77 – 79</b>	
<b>B</b>	<b>3.0</b>	<b>73 – 76</b>	<b>GOOD</b>
<b>B<sup>-</sup></b>	<b>2.7</b>	<b>70 – 72</b>	
<b>C<sup>+</sup></b>	<b>2.3</b>	<b>67 – 69</b>	<b>SATISFACTORY</b>
<b>C</b>	<b>2.0</b>	<b>63 – 66</b>	
<b>C<sup>-</sup></b>	<b>1.7</b>	<b>60 – 62</b>	

These are considered passing grades in Nursing courses.

These are NOT considered passing grades in Nursing courses.

<b>D<sup>+</sup></b>	<b>1.3</b>	<b>55 – 59</b>	<b>POOR</b>
<b>D</b>	<b>1.0</b>	<b>50 – 54</b>	<b>MINIMAL PASS</b>
<b>F</b>	<b>0.0</b>	<b>0 – 49</b>	<b>FAIL</b>
<b>WF</b>	<b>0.0</b>	<b>0</b>	<b>FAIL, withdrawal after the deadline</b>

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

## **PROGRESSION CRITERIA:**

- A. Students must complete the practice components of nursing courses to receive credit. **Students who have not received a pass in the clinical 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. 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.
- C. 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.

**\*\*Note: Refer to the 2019-20 Grande Prairie Regional College Calendar for further details regarding the Grading Policy and Progression Criteria in the Bachelor of Science in Nursing program.**

## **STUDENT RESPONSIBILITIES:**

Refer to the College Policy on **Student Rights and Responsibilities** at

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

## **Nursing Program Policies and Dates:**

Please refer to the 2019/20 Grande Prairie Regional College Calendar at

<http://www.gprc.ab.ca/programs/calendar/> and the University of Alberta Collaborative Baccalaureate Nursing Program with Grande Prairie Regional College Student Handbook for specific nursing program policies and dates.

## **STATEMENT ON PLAGIARISM AND CHEATING:**

Cheating and plagiarism will not be tolerated and there will be penalties. For a more precise definition of plagiarism and its consequences, refer to the Student Conduct section of the College Calendar at <http://www.gprc.ab.ca/programs/calendar/> or the College Policy on Student Misconduct: Plagiarism and Cheating at <http://www.gprc.ab.ca/about/administration/policies/>

**\*\*Note: all Academic and Administrative policies are available on the same page.**

### Appendix A: NS2060 Evidence Informed Practice Assignment Rubric

	<b>Excellent - A</b>	<b>Very Good - B</b>	<b>Good - C</b>	<b>Marginal - D</b>	<b>Fail - F</b>
<b>PICO Question</b>	PICO question is researchable, specific, clear, realistic, and related to nursing. Contains the four components: patient/population/problem, intervention, comparison intervention (if applicable; not always present), and outcome.	PICO question is clear, lacks some specificity, not as researchable but realistic and is related to nursing. Missing one of the four required components.	PICO question relates to nursing but lacks specificity, is unclear, and may not be realistic. May be difficult to research. Missing two of the four required components.	PICO question does not directly relate to nursing. Difficult to research. Unrealistic. Missing three of the four required components.	PICO very vague, or not present. Missing all of the four required components.
<b>Literature Search</b> a. Search strategy b. Selection of studies	-Detailed search strategy documented. -6 or more peer reviewed, current studies used which are directly related to the PICO question.	-Complete search strategy documented -At least 6 peer reviewed, current studies used which are substantially related to the PICO question.	-Basic search strategy documented -At least 6 studies used, most are current and peer reviewed and related to the PICO question.	-Incomplete search strategy documented -- Fewer than 6 sources used. Credibility, currency and peer review questionable. Difficult to relate studies to the PICO.	- Search strategy not documented - Fewer than 6 sources used. Studies are not credible, current, or peer reviewed. Studies do not relate to PCIO question.
<b>Literature Review</b>	Comprehensive and concise identification of study (author in table, complete citation in References), sample size, how the data were obtained, what was measured, results, contribution to answering PICO question.	Complete identification of study (author in table, complete citation in References), sample size, how the data were obtained, what was measured,	Brief identification of study (author in table, complete citation in References), sample size, how the data were obtained, what was measured,	Missing elements: identification of study (author in table, complete citation in References), sample size, how the data were obtained, what was	Missing many components.

		results, contribution to answering PICO question.	results, contribution to answering PICO question.	measured, results, contribution to answering PICO question.	
<b>Knowledge Synthesis</b>	Comprehensive consideration of *how the studies together contribute to answering PICO question *how to implement findings into clinical practice/nursing care or nursing education * areas for further research.	Significant consideration of *how the studies together contribute to answering PICO question *how to implement findings into clinical practice/nursing care or nursing education * areas for further research.	Brief consideration of *how the studies together contribute to answering PICO question *how to implement findings into clinical practice/nursing care or nursing education * areas for further research.	Insufficient consideration of *how the studies together contribute to answering PICO question *how to implement findings into clinical practice/nursing care or nursing education * areas for further research.	Missing many components of *how the studies together contribute to answering PICO question *how to implement findings into clinical practice/nursing care or nursing education * areas for further research.
<b>Spelling, Grammar, APA</b>	Content is exceptionally well written. Grammar, spelling and APA format requires minimal to no revisions.	Content is well written with minor grammar and spelling errors. APA format requires minor revisions.	Content is well written, with some structure and organization needing improvement. Grammar, spelling errors, and APA format requires some revisions.	Content is present, with most structure and organization needing improvement. Grammar and spelling errors evident throughout. APA format is inconsistent and incorrect.	Organization and scope of ideas inadequate. Grammar, spelling and APA is poorly done, or there is evidence of plagiarism.
<b>Poster</b>	Poster extremely well done, creative, informative,	Poster very good. Most	Poster superficial.	Poster difficult to read,	Did not create poster.

	and easy to read/understand. Appropriate use of graphics.	sections easy to read. Mostly appropriate use of graphics.	Some sections difficult to read. Some inappropriate use of graphics.	confusing, difficult to follow, poorly organized. Inappropriate use of graphics.	
--	---	--	--	--	--

## Appendix B: Nursing 2060 Evaluation of Nursing Practice

Student: ID:	Clinical Faculty: Section #:
Placement:	Provided student with copy of evaluation: Yes <input type="checkbox"/> No <input type="checkbox"/>
Days Absent:	<b>Final grade:</b>

### LEVELS OF INDEPENDENCE (There is an expected progression within a course and between levels)

The following levels of independence will be utilized (unless otherwise indicated):

Levels	Levels of independence (beginning of term → end of term)	Description (beginning of term → end of term)
Level 1, junior 1	With assistance → with minimal assistance	The student requires direction and information → The student requires <i>occasional</i> direction and information.
Level 2, junior 2	With minimal assistance → with guidance	The student requires <i>occasional</i> direction and information → The student requires clarification, prompting and confirmation
Level 3, senior 1	With guidance → With minimal guidance	The student requires clarification, prompting and confirmation → The student requires <i>occasional</i> clarification, prompting and confirmation
Level 4, senior 2	With minimal guidance → independently	The student requires <i>occasional</i> clarification, prompting and confirmation → The student works mostly on his or her own and seeks information, clarification and consultation as appropriate

#### Definition of terms:

**Direction:** faculty tells student what to do, about steps to take

**Information:** faculty tells student specifics about a concept, topic

**Clarification:** faculty, through questioning and feedback assists the student to state their information in a different and clear way, often with more details. Student asks questions to increase their understanding; questions asked demonstrate a sound knowledge base

**Prompting:** faculty provides student with a cue the answer is incomplete and how to resolve the lack of information. Prompting is generally used to add breadth or depth.

**Confirmation:** faculty provides positive feedback for correct information and direction provided by the student

**Consultation:** student provides faculty with information and/or direction and asks specific questions about the information.

**Occasional:** indicates that input is provided by faculty now and then.

**GRADING (The student's overall performance will be assessed in each of the categories from Graduate Competencies and Year-End Outcomes Condensed Version 2017-2018)**

The following letter grades will be utilized:

Grade	Description
<i>A</i>	Student meets the objectives at a "Level of Independence" <i>greater</i> than identified on the ENP, <i>all of the time</i> .
<i>B</i>	Student meets the objectives at a "Level of Independence" <i>greater</i> than identified on the ENP, <i>the majority of the time</i> .
<i>C</i>	Student meets the objectives at a "Level of Independence" <i>greater</i> than identified on the ENP, <i>some of the time</i> .
<i>D</i>	Student meets the objectives at a "Level of Independence" required on the ENP <i>inconsistently</i> .
<i>F</i>	Student <i>fails</i> to meet the objectives at a "Level of Independence" required on the ENP.

*\*Refer to the Graduate Competencies and Year-End Outcomes Condensed Version 2017-2018. All courses contribute to the acquisition of each competence. All students are responsible for integrating all knowledge and skills covered in previous and concurrent coursework*

*\*\*If a section is grayed out, it indicates that a competency partially applies in this particular clinical course.*

**RELATED COURSE OBJECTIVE:**

Demonstrate the ability to practice in accordance with Level 1, Junior 1 competencies as described in the document entitled: *Graduate Competencies and Year-End Outcomes Condensed Version 2017-2018*.

<b>1. PROFESSIONAL RESPONSIBILITY AND ACCOUNTABILITY</b>		Midterm Evaluation:
Demonstrates professional conduct and that the primary duty is to the client to ensure safe, competent, compassionate, ethical care.		At Risk: <input type="checkbox"/>
<b>RC</b>	<b>Objective</b>	
<b>Level of independence (beginning of term → end of term): With assistance → with minimal assistance</b>		
<b>1.3.1</b>	➤ Represents self by first and last name and professional designation (protected title) to clients and the health care team.	
<b>1.3</b>	➤ Demonstrates attributes of: accountability and responsibility, beginning confidence and self-awareness, a professional presence, initiative, collaboration with the care team and significance of professional activities.	
<b>2.3</b>	➤ Demonstrates skills and judgments in critical thinking re: new knowledge, the organization of workload and time management.	
<b>3.3</b>	➤ Understands, promotes, and enacts all aspects of safe practice for self, clients and others, including awareness of individual competence within the legislated scope of practice and professional responsibility to take action on recognized unsafe health care practices and workplace safety risks.	
<b>4.3</b>	Promotes a healthy culturally safe practice environment, including the use of basic conflict resolution strategies and the critical assessment, application, evaluation and improvement of protocols, policies and procedures.	
<b>Faculty's comments:</b>		

<b>2. KNOWLEDGE-BASED PRACTICE</b>		Midterm Evaluation: At Risk: <input type="checkbox"/>
<b>A. Specialized Body of Knowledge</b> Has knowledge from nursing and other sciences, humanities, research, ethics, spirituality, relational practice, and critical inquiry.		
<b>RC</b>	<b>Objective</b>	
<b>Level of independence</b> (beginning of term → end of term): <b>With assistance → with minimal assistance</b>		
<b>5.3</b>	Demonstrates knowledge in current and emerging health care issues and challenges, including relevant related knowledge of: workplace health and safety, community development and population health, global and community health and safety, primary care, determinants of health, health disparities and inequities and population health.	
<b>6.3</b>	Demonstrates knowledge in current population and health care research, nursing and health informatics and information communication technology.	
<b>7.3</b>	Develops an increasing knowledge about human growth and development of persons, groups, communities and populations.	
<b>8.3</b>	Demonstrates knowledge in health sciences: physiology, pathology, pharmacology, epidemiology, genetics, and immunology.	
<b>9.3</b>	Demonstrates knowledge in nursing science, social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care and the contribution of registered nurse practice to the achievement of positive health outcomes.	
<b>10.3</b>	Accesses, critiques and uses research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice.	
	<b>Faculty's comments:</b>	
<b>3. KNOWLEDGE – BASED PRACTICE</b>		Midterm Evaluation: At Risk: <input type="checkbox"/>
<b>B. Competent Application of Knowledge</b> Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas about the provision of nursing care (Ongoing comprehensive assessment; health care planning; providing nursing care, and; evaluation). The provision of nursing care is an iterative process of critical inquiry and is not linear in nature. Area 1: Ongoing Comprehensive Assessment - Incorporates critical inquiry and relational practice to conduct a comprehensive client-focused assessment that emphasizes client input and the determinants of health.		
<b>RC</b>	<b>Objective</b>	
<b>Level of independence</b> (beginning of term → end of term): <b>With assistance → with minimal assistance</b>		
<b>11.3</b>	Reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting.	
<b>12.3</b>	Uses anticipatory planning, analyzes and interprets data and collaborates with the health team during ongoing assessment of the client's actual and potential health status and identification of their needs, capacities and goals.	
<b>13.3</b>	Uses appropriate, comprehensive assessment tools and information and communication technologies to assess clients and support information synthesis, complying with evidence-informed practice, agency policies and protocols and completing assessments in a timely manner.	
	<b>Faculty's comments:</b>	



<b>4. KNOWLEDGE-BASED PRACTICE</b> <b>B. Competent Application of Knowledge</b> Area 2: Health care planning: within the context of critical inquiry and relational practice, plans nursing care appropriate for clients which integrates knowledge from nursing, health sciences and other related disciplines, as well as knowledge from practice experiences, clients' knowledge and preferences, and factors within the health care setting.		Midterm Evaluation: At Risk: <input type="checkbox"/>
<b>RC</b>	<b>Objective</b>	
<b>Level of independence (beginning of term → end of term): With assistance → with minimal assistance</b>		
<b>14.3</b>	Minimizes positional power and promotes client ownership by involving clients in identifying and outcomes of care, exploring care alternatives and accessing appropriate resources.	
<b>15.3</b>	Uses critical inquiry and principles of primary health care to initiate appropriate planning for clients' anticipated health problems, client and staff safety concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems.	
	<b>Faculty's comments:</b>	
<b>5. KNOWLEDGE-BASED PRACTICE</b> <b>B. Competent Application of Knowledge</b> Area 3: Providing Registered Nursing Care: Provides client-centred care in situations related to: <ul style="list-style-type: none"> <li>• Health promotion, prevention and population health;</li> <li>• Maternal/child health;</li> <li>• Altered health status including acute and chronic physical and mental health conditions and rehabilitative care;</li> <li>• Palliative care and end-of-life care.</li> </ul>		Midterm Evaluation: At Risk: <input type="checkbox"/>
<b>RC</b>	<b>Objective</b>	
<b>Level of independence (beginning of term → end of term): With assistance → with minimal assistance</b>		
<b>16.3</b>	Performs effectively in rapidly changing client condition; Applies bio-hazard and safety principles to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care.	
<b>17.3</b>	Incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others.	
<b>18.3</b>	Incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying out decisions and implementing care across the lifespan.	
<b>19.3</b>	Provides culturally safe, competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources.	
<b>20.3</b>	Recognizes, seeks help and assist in rapidly changing, unstable client situations.	
<b>21.3</b>	Prioritizes and provides timely care and consult as necessary in complex and rapidly changing client situation.	

22.3	Provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes.	
	Faculty's comments:	
6. KNOWLEDGE-BASED PRACTICE B: Competent Application of Knowledge Area 4: Evaluation of client care: Monitors the effectiveness of client care to inform future care planning.		Midterm Evaluation: At Risk: <input type="checkbox"/>
RC	Objective	
Level of independence (beginning of term → end of term): With assistance → with minimal assistance		
23.3	In consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required.	
24.3	Provides concise, accurate, timely reports and documentation of care.	
	Faculty's comments:	
7. ETHICAL PRACTICE Demonstrates competence in professional judgment and practice decisions guided by the values and ethical responsibilities in the CNA Code of Ethics for Registered Nurses (2017, and the CARNA document Ethical Decision-making-for Registered Nurses in Alberta: Guidelines and Recommendations (2010). Engages in a critical inquiry to inform clinical decision-making and establishes therapeutic, caring, and culturally safe relationships with clients and health-care team.		Midterm Evaluation: At Risk: <input type="checkbox"/>
RC	Objective	
Level of independence (beginning of term → end of term): With assistance → with minimal assistance		
25.3	Promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning.	
26.3	Practices according to the CNA Code of Ethics including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical responsibilities and legal obligations, informed consent, client autonomy, advocacy privacy, confidentiality and security.	
	Faculty's comments:	
8. SERVICE TO PUBLIC Demonstrate an understanding of the concept of public protection and the duty to provide nursing care in the best interests of the public.		Midterm Evaluation: At Risk: <input type="checkbox"/>
RC	Objective	
Level of independence (beginning of term → end of term): With assistance → with minimal assistance		
27.3	Demonstrates leadership in coordination of health care, promotion of interprofessional collaboration, team communication and development, including knowledge of the scope of practice of members and the appropriate assignment, delegation and supervision of work within the team to facilitate continuity of care.	
28.3	Uses knowledge of all levels of the health care system to: assess and improve organizational culture, enhance the quality of professional and safe practice environment, use established policies and protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change.	

29.3	Supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness.
30.3	Applies principles of workplace health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages resources.
	<b>Faculty's comments:</b>
<b>9. SELF-REGULATION</b>	
Demonstrates an understanding of professional self-regulation by developing and enhancing own competence, ensuring consistently safe practice, and ensuring and maintaining own fitness to practice.	
Midterm Evaluation: At Risk: <input type="checkbox"/>	
<b>RC</b>	<b>Objective</b>
<b>Level of independence</b> (beginning of term → end of term): <b>With assistance → with minimal assistance</b>	
31.3	Understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating.
32.3	Assumes individual responsibilities for all aspects of professional-legal privilege and public trust by assessing and maintaining competence and fitness to practice.
	<b>Faculty's comments:</b>
<b>10. INQUIRY LEARNING</b>	
Demonstrate competency with the application of the elements of inquiry learning in theory, laboratory and clinical experiences.	
Midterm Evaluation: At Risk: <input type="checkbox"/>	
<b>RC</b>	<b>Objective</b>
<b>Level of independence</b> (beginning of term → end of term): <b>With assistance → with minimal assistance</b>	
33.3	Demonstrates competency with the application of the elements of inquiry learning in class, laboratory and clinical experiences.
34.3	Demonstrates the ability to deal with ambiguity and diversity.
35.3	Demonstrates collegiality in professional practice.
36.3	Demonstrates understanding of content through professional / scholarly writing.
	<b>Faculty's comments:</b>

<b>MIDTERM EVALUATION: (For student identified at risk for failing)</b>	
Section(s)/related course objective(s) that needs further development/improvement:	
Recommendations for further development/improvement for the remaining term:	
Plan of action:	
Actions to be taken have been discussed with student:	Yes <input type="checkbox"/> No <input type="checkbox"/> Student's initials _____

**FINAL EVALUATION:**

**Student's comments:**

**Faculty's comments and recommendations for further development/improvement for next clinical course:**

**Student (PRINT NAME):**

**Student (SIGNATURE):** \_\_\_\_\_

**Date:**

Please Note: A student signature denotes that the student has read the evaluation; it is not representative of the student's opinion of the evaluation.

**Clinical Faculty (PRINT NAME):**

**Clinical Faculty (SIGNATURE):** \_\_\_\_\_

**Date:**

Please Note: This information is collected for the purpose of appraising student performances; assigning a course mark; and monitoring student progress under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. For further information, please contact the Associate Dean Undergraduate Programs in the Faculty of Nursing.