



# DEPARTMENT OF NURSING EDUCATION AND HEALTH STUDIES COURSE OUTLINE – Winter One 2016

NS2950: Nursing Practice IV -7 (fi 14) (either term, 3-25c-3 in 7 weeks)

Originally developed by the Clinical Experience Development Committee

Revised by the Learning Experiences Committee, April 2013

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Approved: May 2013

Course Leader:	Office:	Email:	Phone:
Karen Oostra RN, BSc, MSN	H205	koostra@gprc.ab.ca	780-539-2449
Instructors:			
Karen Oostra RN, BSc, MSN	H205	koostra@gprc.ab.ca	780-539-2449
Bonny Townsend RN, MSN	J223	btownsend@gprc.ab.ca	780-539-2213

See individual instructor for specific office hours. Extra meetings may be scheduled as needed

**CALENDAR DESCRIPTION: NURS 2950 Nursing Practice IV** \*7 (fi 14) (either term, 3-25c-3 in 7 weeks). Practice focuses on restoration, rehabilitation and support (including health promotion and disease prevention) of clients with chronic and less acute variances in health across the life span. Practice occurs in homes or in community-based settings.

**PREREQUISITE(S)/COREQUISITE:** NURS 140, 150, 1900, 1910, 1940, 1950 and MMI 133. Pre- or corequisite: NURS 2900.

## REQUIRED TEXT/RESOURCE MATERIALS:

## **Required Resource Materials:** (available on Moodle)

- 1. Graduate Competencies and Year End Outcomes
- 2. Evidence Informed Practice Guidelines and Grading Rubric (on Moodle)
- 3. Evaluation of Nursing Practice (ENP) Document (on Moodle)
- 4. Nursing Student Handbook

## **Required Texts:**

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, ON: Mosby.

Chow, J., Ateah, C. A., Scott, S. D., Ricci, S. S., & Kyle, T. (2012). Canadian Maternity and Pediatric Nursing. Philadelphia: Lippincott, Williams, & Wilkins.

e-dose software

Nursing Drug Guide or e-CPS or Phone app.

Potter, P.A., Perry, A.G., Ross-Kerr, J.C., & Wood, M.J. (2014). Canadian fundamentals of nursing (revised 5th ed.). Toronto, Ontario: Elsevier Mosby.

Stephen, T.C., Skillen, D.L., Day, R.A., & Jenson, S. (2013). Canadian Jensen's Nursing Health Assessment: A Best Practice Approach. Philadelphia: Lippincott, Williams & Wilkins

Sylvestri, L. A., (2014). Saunders Comprehensive Review for the NCLEX-RN Examination (6th ed.)St. Louis, MO: Elsevier Saunders

## **OPTIONAL TEXTS:**

Ackley, B. J., & Ladwig, G. B. (2011). *Nursing diagnosis handbook: An evidence-based guide to planning care* (9<sup>th</sup> ed.). St. Louis: Mosby.

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

**DELIVERY MODE(S):** Clinical Nursing Practice, Seminar, and Lab

## **COURSE OBJECTIVES:**

Overarching statements:

Students are responsible to familiarize themselves with *Graduate Competencies and Year Outcomes* (with Cross Reference to courses) 2010-2011. Attention must be given to the competencies that are identified as being relevant to NURS 2950.

Students must regularly refer to the document entitled *Graduate Competencies and Year-End Outcomes Condensed Version* 2010-2011. Attention must be given to the Year 2 Column. This document serves as the basis for the evaluation of students' clinical practice.

All students must practice in a manner that is consistent with:

- CARNA Nursing Practice Standards (2003) and all other CARNA standards
- The CNA Code of Ethics for Registered Nurses (2008).
- 1. Demonstrate, with assistance, the processes of self-directed learning, critical thinking, and group process in utilizing context-based learning, in all learning activities.
- 2. Demonstrate, with minimal assistance, the ability to practice in accordance with Year 2 competencies, as described in the document entitled: *Graduate Competencies and Year-End Outcomes Condensed Version* 2010-2011.
- 3. Demonstrate, with minimal assistance, 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, with minimal assistance, the ability to manage restoration, rehabilitation, and support activities for clients experiencing chronic or less acute variances in health.
- 5. Demonstrate, with minimal assistance, the ability to manage health promotion and primary prevention activities using advanced therapeutic/interpersonal communication skills, health counseling skills, and teaching and learning principles.
- 6. Demonstrate, with minimal assistance the ability to perform intermediate health—assessments skills with healthy individuals across the lifespan in the context of family within—a community, and demonstrate with assistance the ability to perform basic assessment of—the childbearing family.
- 7. Demonstrate, with minimal assistance, the ability to engage in evidence-based practice.
- 8. Demonstrate the ability to integrate knowledge into clinical practice. Describe, understand and articulate an understanding of theory related to key patient safety concepts including communication, teamwork, environmental influences and human factors, safety risks and adverse disclosure.

## **LEARNING OUTCOMES:**

- 1. Describe, understand and articulate an understanding of theory related to patient centered care and interdisciplinary practice.
- 2. Apply knowledge of anatomy, physiology, and pathophysiology during the physical examination of the well adult considering modifications for age.
- 3. Demonstrate preparedness, professionalism, and appropriate skills, within the course.
- 4. Describe the basic examination techniques and specific characteristics to be assessed during the physical examination.
- 5. Provide rationale underlying the techniques used during the physical examination.
- 6. Conduct a health history interview that represents a comprehensive account of the adult client's physical, social, and mental health status with modifications for the client's age.
- 7. Include a health promotion focus throughout the health history interview and physical examination.
- 8. Perform a physical examination on a well adult client within the class setting, using appropriate equipment and assessment procedures and techniques.
- 9. Draw upon subjective and objective data to validate findings, and draw inferences on the client's health status.
- 10. Differentiate between findings which are within expected limits, including age specific differences, and findings which denote deviations.
- 11. Document a comprehensive health history and physical exam using principles of recording.
- 12. Demonstrate, with minimal assistance, the processes of self-directed learning, critical thinking, and group process skills in utilizing context based learning, in all learning activities.

## Levels of Independence:

The following are levels of independence will be used when considering student performance in meeting course objectives:

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 their own and seeks information, clarification, and consultation as appropriate.

**Direction:** The instructor advises the student what to do and what steps to take.

**Information:** The instructor advises the student about specific details related to a concept or topic.

**Clarification:** The instructor, through questioning and feedback, assists the student to state her/his information in a different and clearer way, often with more details. The student asks questions to increase their understanding and to demonstrate a sound knowledge base.

**Prompting:** The instructor provides the student with a cue that the answer is incomplete or incorrect, and offers a way to resolve a lack of information. A prompt is broader than a hint. Prompting is used, generally, to add breadth or depth to the level of understanding.

**Confirmation:** The instructor provides the student with positive feedback for correct information and for appropriate self-direction taken by the student.

**Consultation:** The student provides the instructor with essential information and asks specific questions about a particular situation. The information and direction needing to be taken is confirmed by the instructor.

**Occasional:** The instructor provides the student with occasional input

## TRANSFERABILITY:

UA, UC, UL, AU, GMU, CU, CUC, KUC.

Please consult the Alberta Transfer Guide for more information (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

## **EVALUATIONS:**

## To PASS Nursing 2950, students must:

In order to pass NURS 2950, students must demonstrate safe ethical nursing practice, professional behaviour, and complete the following experiences. Students are expected to implement previously learned nursing skills.

- 1. During this course, students will have a continuous experience in community-based practice and in homes and some acute care settings. Students will participate in nursing care of child-bearing families, health promotion programs, prevention programs, birthing and post-partum experiences.
- 2. Participate in site-selected labs (see 'Map of Theoretical Labs, Clinical Labs and Clinical Seminars').
- 3. Participate in a client experience during birthing, post-partum. If a live birthing experience is not available, a birthing film or simulation will be utilized.
- 4. Participate in health promotion activities in a public health setting.
- 5. Observe and/or participate during a Well Baby Clinic.
- 6. Utilize the CFAM/CFIM model.
- 7. Perform an assessment on a newborn.
- 8. Collaborate with clients, family, nurse, community members and members of other disciplines.

## SUGGESTED OPTIONAL LEARNING EXPERIENCES (site specific):

- 1. Observe and/or participate during the immediate post-partum home visit.
- 2. Participate in a prenatal, labour and delivery, and post-partum follow-through experience.
- 3. Participate in a prenatal class.
- 4. Participate in community support activities organized by the health unit, if available.
- 5. Participate in immunization programs.
- 6. Observe and/or participate in health team meetings.

Nursing practice must be evaluated using the <u>Evaluation of Nursing Practice (ENP) tool</u> (75%). A written Reflective Journal will be incorporated with the ENP, see full description of Journal assignment under COURSE WORK and DUE DATES.

• To encourage the development of self-reflective practice, it is recommended that client preparation, reflective practice, nursing care and learning plans be evaluated through discussion during the clinical day and post conference.

## **Evaluation of student's clinical performance:**

A formative and written summative Evaluation of Nursing Practice will be completed by the student and the tutor. This will be accomplished through observation, assessment, and evaluation of the student during nursing practice. Evaluations will be made by the tutor and may be supplemented with input from peers, the staff of an agency, and the client. Tutors are directed to refer to the current Evaluation of Nursing Practice document from the Evaluation Strategies Committee.

- Formative Evaluations will occur throughout clinical and a written summative evaluation of Nursing Practice will be completed by the student and the instructor at the end of each clinical area. See ENP posted on Moodle.
- Students must complete an ENP at the end of each clinical area (Postpartum, Public Health). Your ENP grade will be assigned at the end of the rotation in consultation with both NS 2950 instructors.

Final Evaluations (ENP) will be held on February 26<sup>th</sup>, 2016 in room G111.

• The ENP grade will be an AVERAGE of your performance in all Maternal/Child areas of practice including Postpartum, L & D, Pediatrics, NICU, and Public Health settings.

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" on the ENP, as the student has then shown unsafe, unprofessional, or unethical nursing practice.

## **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 at the tutor's discretion 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.

Unsafe clinical practice is behavior that places the client or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the client or family at risk for emotional or psychological harm. Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk.

Scanlan, J. M., Care, W. D., & Gessler, S. (2001). Dealing with the unsafe student in clinical practice. Nurse Educator, 26 (11), 23-27

#### **COURSE WORK and DUE DATES**

## **1. Reflective Journal** (Incorporated into ENP)

Due Date: January 29th, 2016 at 0830h.

For the purposes of this assignment, students will be required to choose ONE INCIDENT that occurred in any of the NS 2950 experiences. It is not intended to be a commentary of a clinical shift, but rather an experience that allows you to "gain an understanding of how cognitive and personal experiences have contributed" to your own knowledge, experience and clinical practice (ie: 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 2-4 pages type written. You may or may not choose to relate your experiences to the literature. Journals must be submitted in APA format. Please maintain patient/staff confidentiality when writing your journal.

Here are some questions that may help you to write your journal:

- 1. What happened? What were the facts?-Be objective
- 2. What was my role in the incident?
- 3. What are the feelings and senses you had surrounding the incident?
- 4. What did you do?
- 5. How did you feel about your choices? Why?
- 6. What was the setting that you were in?
- 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 preceded and what followed the incident?
- 10. What did I learn from the incident?
- 11. What would I teach my peers if they were in a similar situation?

Ibarreta, G.I., & McLeod, L. (2004). Thinking aloud on paper: An experience in journal writing. *Journal of Nursing Education*, 43(3), 134-137.

Patton, J., & Woods, S. (1997). Enhancing the clinical practicum experience through journal writing. *Journal of Nursing Education*, *36* (5), 238-240.

## 2. Knowledge Synthesis Assignment (25%)

## \*\*\*IMPORTANT DATES\*\*\*:

Clinical Practice Question approved – No later than January 22<sup>nd</sup>, 2016.

Knowledge Synthesis Assignment Due-February 1st, 2016 @ 0830

The purpose of this assignment is to integrate current research/evidence into nursing practice. A clinical practice question related to maternal/child nursing care will be identified and developed. A literature review will be conducted, and the results of the literature review will be synthesized and integrated into an evidence informed nursing care strategy based on the clinical practice question. The student will share the results of their knowledge synthesis with the clinical group. This will be in the form of a presentation which uses Power Point, it is expected that the student will present in a professional manner.

## **Assignment Guidelines:**

- 1) Identification and development of a clinical practice question related to maternal / child nursing care.
- 2) Literature review: Conduct a literature review which will be used to answer your clinical practice question. Sources must be peer reviewed, current (no older than 5 years), and directly related to your clinical practice question.
- 3) Knowledge Synthesis: Discover what each source from the literature review states in relation to your clinical practice question. You must consider the type of study (quantitative or qualitative), who the sample population is, how many were in the study, is it peer reviewed, does it support or refute current clinical practice, what are the pro's or con's in implementing the current evidence into your nursing care.
- 4) Integration of Evidence to Nursing Practice, consider the following:
  - Would my nursing practice decisions be supported by the evidence I have discovered?
  - How would I integrate the evidence into my practice, describe what client care would look like.

The assignment will be in the form of a presentation (you will use Power Point or Prezi) in which you establish what your clinical practice question is, illustrate the findings from your literature review, and discuss how this evidence would inform your nursing practice.

## Grading rubric is available online.

Students must submit their clinical practice question for feedback and approval prior to the start of their assignment and no later than 0830 on January 22<sup>nd</sup>, 2016 at 0830h.

All students are expected to submit their presentation on the due date of **February 5<sup>th</sup>**, **2016 at 0830h**. Each student will have 20 minutes to present their knowledge synthesis assignment.

You will also design a <u>Peer Evaluation Tool</u> that you will pass into your instructor on the day of your presentation. You will have your Peers evaluate your presentation using this tool.

All student assignments must be passed in on the same day. Students will sign up and present on one of the two scheduled seminar days.

Research Assignment Components:	Due Dates:		
Clinical Practice Question for feedback	January 22 at 0830		
Knowledge Synthesis Presentation and PowerPoint Due	February 5th at 0830 (All students)		
[pass in a printed copy]			
Knowledge Synthesis Presentations are scheduled	February 5 <sup>th</sup> and 12 <sup>th</sup> during Seminar		

In order to pass NURS 2950, students must demonstrate safe, ethical nursing practice; professional behavior; complete every one of the required activities [Reflective Journal, Research Assignment, Clinical Practice, and Evaluation of Nursing Practice (ENP)]; and acquire a passing grade in the Evaluation of Nursing Practice (ENP).

## **GRADING CRITERIA:** (The following criteria may be changed to suite the particular course/instructor)

Please note that most universities will not accept your course for transfer credit **IF** your grade is **less than C-**. This means **DO NOT GET LESS THAN "C-" IF YOU ARE PLANNING TO TRANSFER TO A UNIVERSITY.** 

Alpha	4-point	Percentage	Alpha	4-point	Percentage
Grade	Equivalent	Guidelines	Grade	Equivalent	Guidelines
A+	4.0	90-100	C+	2.3	67-69
A	4.0	85-89	С	2.0	63-66
A-	3.7	80-84	C-	1.7	60-62
B+	3.3	77-79	D+	1.3	55-59
В	3.0	73-76	D	1.0	50-54
B-	2.7	70-72	F	0.0	00-49

## COURSE SCHEDULE/TENTATIVE TIMELINE:

**LEC**: 0 **SEM**: 21 **CLINICAL**: 175 **LAB**: 21

Clinical Schedule	Seminar Schedule		
Days: Mon, Tues, Weds, Thurs, Friday	Days: Fridays		
Hours:	<b>Hours:</b> 0830h to 1120h		
Post partum 2-South 0700-1900 T/W (Changes			
for Fall Break – Check schedule)			
Public Health 0830 - 1630			
Labor and Delivery 0700 - 1500 or 1500 - 2300			
Pediatrics 3South 0700 - 1900			
NICU 0700 - 1900			
Place: Grande Prairie clinical agencies as	Room: G111		
assigned			

## STUDENT RESPONSIBILITIES:

Overarching statements:

Students are responsible to familiarize themselves with Graduate Competencies and Year-End Outcomes (with Cross Reference to Courses) 2014-2015. Attention must be given to the competencies that are identified as being relevant to NS 2950.

Students must regularly refer to the document entitled Graduate Competencies and Year-End Outcomes Condensed Version 2014-2015. Attention must be given to the competencies that are identified as being relevant to NS 2950. This document serves as the basis for the evaluation of students' clinical practice.

All students must practice in a manner that is consistent with:

- College and Association of Registered Nurses of Alberta. (2013). Entry-to-practice
  competencies for the registered nurses profession. Edmonton, AB: Author. Retrieved from
  http://www.nurses.ab.ca/content/dam/carna/pdfs/DocumentList/Standards/RN\_EntryPracticeCo
  mpetencies\_May2013.pdf
- College and Association of Registered Nurses of Alberta. (2013). Practice standards for regulated members with The Canadian Nurses Association code of ethics for registered nurses. Edmonton: Author. Retrieved from http://www.nurses.ab.ca/content/dam/carna/pdfs/DocumentList/Standards/PracticeStandards\_C NA\_Ethics\_2008.pdf
- Grande Prairie Regional College Student Calendar

## All Policies Relating to NS 2950:

All GPRC Policies can be located at the following Website: <a href="http://www.gprc.ab.ca/about/administration/policies.html">http://www.gprc.ab.ca/about/administration/policies.html</a>

#### 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 picture ID.

#### **ATTENDANCE:**

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

## **Assignment Policy:**

It is expected that <u>ALL</u> assignments must be completed to obtain credit in the course. Assignments are expected to be passed in at the time and place they are due. Extensions <u>may</u> 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 that an assignment is submitted after the due date will be deducted from the final mark (Please refer to the Late Assignment Policy posted on Moodle). For example, a paper marked at B+ would receive an adjusted grade of B if handed in one day late. Late assignments are due by 08:30 and if submitted via drop box at the main office they must be verified (stamped with date and time) by Nursing office personnel.

When submitting assignments **electronically**, it is the **student's** responsibility to ensure the assignment has been received.

## 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 Admission Guide at <a href="http://www.gprc.ab.ca/programs/calendar/">http://www.gprc.ab.ca/programs/calendar/</a> or the College Policy on Student Misconduct: Plagiarism and Cheating at <a href="http://www.gprc.ab.ca/about/administration/policies/\*\*">www.gprc.ab.ca/about/administration/policies/\*\*</a>

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

## **Additional Information:**