



**UNIVERSITY OF ALBERTA  
COLLABORATIVE BACCALAUREATE  
NURSING PROGRAM  
Grande Prairie Regional College  
Grant MacEwan College  
Keyano College  
Red Deer College  
University of Alberta**

**NURSING 3910  
Nursing Practice V  
COURSE OUTLINE  
Winter Term 2002**

**Adapted for Grande Prairie Regional College by  
Heidi Watters February 2002**

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## NURSING 3910 Course Outline

**NURS 391 Nursing Practice V \*7 (fi 1d)**(either term, 0-3s-28c in 7 weeks). Practice focuses on restoration, rehabilitation and support (including health promotion and disease prevention) of clients experiencing more acute variances in health across the life span. Practice occurs in primary, secondary and tertiary level acute care settings.  
Prerequisites: NURS 2910, 2940, 2950.

### COURSE HOURS:

7 Weeks

Lecture /Seminar: 21 hours

Lab/Clinical: 196 hours

### COURSE DESCRIPTION:

Opportunities will be provided for students to develop advanced skills in health assessment, intervention and communication with clients across the life span. The focus of this clinical course will be the client and their families with more acute variances in health . Students will continue to incorporate health promotion, and all levels of prevention in nursing practice. Nursing practice over a continuous block of time will occur in various acute care settings

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**Clinical/Lab/Seminar Schedule:** You will receive an individual schedule on your first orientation day, March 4, 2002, outlining your exact clinical, lab, and seminar hours. Seminar will take place every Friday in room H223 at the college from 0830-1120.

**Last day for withdrawing with permission from this course is April 3, 2002. Withdrawal from a course after this date will result in a failing grade.**

**Late Assignment Policy:** It is expected that ALL assignments are completed in order to pass a course. All assignments are expected to be passed in at the 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 5% for each working day that an assignment is submitted after the due date will be deducted from the final mark. For example, a paper scored at 75% would receive an adjusted grade of 70% if handed in one day late. Late assignments are due by 4:00 p. m. and must be verified (stamped with date and time) by Nursing office personnel. (August 30, 1999)

### **Progression Criteria (Clinical)**

Students must complete the theory and practice components of nursing courses to receive credit. Students who have not received a pass in the Clinical or 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, explained in the course outline, must be completed for credit to be granted. A student who is absent more than two clinical days in one clinical nursing course may need to make up the lost time before being allowed to continue in the program. Absences from the clinical site may result in the instructor being unable to evaluate the student's clinical performance. If clinical performance cannot be evaluated, a failing grade may be assigned in the course.

Whenever a student's clinical performance is considered marginal in a nursing course, the student's total academic and clinical performance in the program is reviewed at the end of each term and considered in determining continuation in the program.

An instructor, in consultation with the Chair, may immediately deny assignment of a student to, withdraw a student from, or vary terms or conditions of a site of a practicum/clinical placement, if the instructor has reasonable grounds to believe that this is necessary in order to protect public interest.

CPR certification at the Basic Rescuer Level must be maintained throughout the program.

**Absence:** If you must be absent from a scheduled clinical day, you must contact the clinical agency as well as your clinical instructor. You must discuss your absence with your tutor and may need to make up time in the clinical agency. If you must be absent from a scheduled seminar or laboratory day, you must contact your instructor and may need to complete an assignment to cover the missed course content. Attendance and participation is expected of all students in all seminars, labs, and clinical days. Students are expected to be punctual during their clinical experience in the agency.

**Professional Dress:** It is expected that all students will follow the dress code of the clinical agency they attend. It is expected all students will wear a Grande Prairie Regional College name tag at all times, including in clinical areas you may be observing in (OR, RR, PAC).

**Preparation for clinical experience:** It is expected that you will prepare for each clinical day by researching procedures, medical conditions, medications, surgical procedures, etc. Required psychomotor skills may also need to be reviewed prior to the clinical experience. Students should be prepared to discuss their client plan of care (including the client priority needs, nursing diagnoses, medication profiles, any client teaching plan, etc.) with the instructor during clinical time. If a student is not adequately prepared for clinical, the instructor may request the student leave the clinical agency. This would be a decision made after considering client safety.

**COURSE OBJECTIVES:**

Upon completion of Nursing 3910, the nursing student will be able to:

1. Analyse nursing knowledge as well as knowledge from other disciplines (research, models and theories) related to bio-psycho-socio-cultural-spiritual factors in nursing practice with clients experiencing more acute variances in health.
2. Demonstrate application of legal and ethical standards in a variety of nursing practice settings by: support of colleagues, decision making, protecting clients' values, beliefs, and rights within the mandate and the role of the professional association.
3. Demonstrate professional behaviors in nursing practice (respect, communication, integrity, responsibility, accountability, self-awareness, self performance appraisal.)
4. With guidance, assumes primary responsibility for attaining and maintaining competence in nursing practice.
5. Analyse concepts related to health promotion, primary, secondary and tertiary prevention, with clients and families with increased complexity and more acute variances in health by:
  - demonstrating safe nursing care for 2-3 clients
  - coordinating client care using sound clinical judgment, critical thinking and innovation with increasing independence
  - demonstrating competence in mobilizing power structures
  - demonstrating beginning competence in dealing with diversity and ambiguity, assisting clients with decision making
6. Demonstrate competence in ability to interact with and develop collaborative partnerships with clients, community members, nurses, and members of other disciplines, displaying valuing, respecting autonomy and commitment to caring.
7. Demonstrates competence in selected skills required for nursing care of clients experiencing acute and complex variances in health.

**Nursing Program Policies**

Please refer to the Grande Prairie Regional College calendar as well as the Collaborative Baccalaureate Nursing Program Student Handbook for specific nursing program policies.

## **REQUIRED LEARNING EXPERIENCES:**

In order to pass Nursing 3910, students must demonstrate safe ethical nursing practice, professional behavior, and complete the following experiences. All assignments must be completed to receive credit in this course. Students must pass the DCO portion of the course. A mark of "1" in any listed behavior constitutes a failure in the DCO. A minimum pass mark in the DCO is 50%.

### **Nursing Practice**

Nursing practice will be evaluated by means of the following:

#### **1. Learning Plan: 5%**

Students will develop a learning plan to explore personal learning objectives compatible with the experiences of this course. A learning plan is the agreement between the student and the instructor specifying what the student intends to learn during the clinical experience and how this will be accomplished, the time frame for meeting the objectives, and the methods by which achievement of the objectives will be measured. The learning plan is intended to enable the students to work through steps of assessing, planning, implementing, and evaluating the learning process. The steps of this process are:

- To provide the student with an opportunity to make an individual learning goal within the framework of the course objectives, BUT does not repeat the course objectives.
- Allows the student to determine learning objectives in view of their own perception of their strengths and areas for improvement.
- Identifies strategies for meeting these goals.
- Identifies a timeline to meet the goals.
- Identifies an evaluation strategy to meet these goals.

Students are required to submit three learning goals, with evidence to support how the goals in the learning plan will be met.

#### **Learning Plan due date: March 15, 2002**

Students will follow up their learning plan at the end of the course to identify whether their learning plan goals were met during the duration of this clinical course.

#### **2. Direct Clinical Observation: 50%**

**A formative and written summative evaluation of Nursing Practice will be completed by the student and instructor.**

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

The selected areas of nursing practice will be on a Surgical unit. Observational experiences will also occur in the operating room, recovery room, and pre-admission clinic. During these experiences students will re-familiarize themselves with nursing practice while integrating an expanding knowledge and skill base. Student practice performance is evaluated according to the criteria outlined in the Direct Clinical Observation Guide to Grading.

- All categories on the DCO are weighted equally (knowledge, helping relationship, etc.)
- Students must pass the DCO to pass the course. An overall mark on the DCO of 50% must be achieved for the student to pass.
- Receiving a 1 (one) in any listed behavior constitutes a failure on the DCO regardless of overall DCO mark.
- If the student fails the DCO, and consequently the course, the student will receive a 3 (three) as an overall course grade regardless of any marks received in the other assignments for the course.

A midterm written evaluation will be completed by the student and instructor. Both the student and instructor will complete a written final evaluation. Midterm evaluations will be completed in week four of this course. Final evaluations will be completed in week seven.

**Note:** If applicable, the instructor will inform a student with unsatisfactory performance, which is indicative of a clinical failure, immediately in writing. To facilitate progress of the student with unsatisfactory performance, a remedial plan will be developed by the instructor in consultation with the student.

**Students must receive a passing grade in the DCO component of Nursing 3910 to pass this course.**

**A. Essential:**

Over the seven weeks students will have a continuous experience in an acute care setting with adults or children which will include:

1. Use of a nursing model to guide nursing practice with clients and families experiencing increased complexity and more acute variances in health.
2. Setting priorities and coordinating safe nursing care for 2-3 clients.
3. Collaborating with clients, families, nurses, community members and members of other disciplines.

*Students are expected to implement previously learned nursing skills*

### 3. **Peri-operative Experience paper:** **30%**

Students are expected to write a short paper describing one of the procedures they observe in their operating room experience day. If possible, this should include the recovery room experience of the patient and their expected and actual outcome after surgery. The purpose of this assignment is for the student to gain an understanding of the peri-operative experience and the issues that may arise throughout a patient's hospital stay. The object of this assignment is to assist the student to understand the process of surgery from beginning to end. As part of the expected observation, the patient's pre-operative understanding should be reviewed in the holding room prior to surgery if possible. The peri-operative experience is the planned process of systematic, integrated nursing interventions carried out by a variety of nursing disciplines. Each aspect of the surgical experience affects the patient and his/her family. This nursing process is a way of looking at nursing and brings in critical thinking that guides nursing actions. This process focuses on the patient and guides the nurse to develop nursing interventions to meet patient needs.

- The paper should not exceed 10-12 pages in length.
- The paper is due on the Friday one week after your peri-operative observational day
- Assignments that are late will be reduced by 5% per day from the original grade.

### 4. **Critical Incident Journal:** **15%**

Identifying critical incidents as a student in nursing education facilitates the integration of theory and practice. It can assist the student to foster reflective practice and personal and professional development. Critical incidences and reflections allow the students to increase their own knowledge of practice. Students will be required to examine three incidences that occurred in Nursing 3910. The student will examine the incident and identify key elements and issues both within the incident itself and in relation to their own attitudes and actions.

The guidelines for each journal entry are as follows:

- A. Describe a significant event/incident that has occurred. Write a few paragraphs describing the incident (i.e. what you or someone else did in an intervention, communication) as possible. Include your thoughts, feelings, and perceptions.
- B. Reflect on the event/incident. Describe why this event was important to you and what factors influenced your/someone else's decisions/actions/feelings (such as assessments, previously learned experiences, values, beliefs, stereotypes, or biases)
- C. Evaluate your strengths and areas needing improvement in this situation. Explain why you thought those areas were strong or needed improvement.
- D. Describe your significant learning. What would you do differently/investigate/maintain if a similar incident should occur again. Describe what you would teach someone else (peer/colleague) about this incident in order to improve your nursing practice. Provide nursing literature/valid resources that support your conclusions.

**Critical Incident Journal Due Dates:**

- #1. March 22, 2002  
 #2. March 29, 2002  
 #3. April 5, 2002

- Journals **MUST** be handed in by 4:00 p.m. on the Friday of the week they are due. Missing or late submissions will be subject to the 5% penalty outlined in the late assignment policy.
- Each critical incident journal should be between 5-8 pages typed. Attach the references as per APA format at the end of each journal.
- Remember to keep all entries confidential (i.e. by not including names of patients or staff).
- The marking guide for the critical incidents is attached.

**Remember this is not a logbook to account for what happened on each shift.**

**SUMMARY OF EVALUATION:**

1.	Learning Plan	5%
2.	Direct Clinical Observation	50%
3.	Peri-operative Experience Paper	30%
4.	Critical Incident Journal	15%

**Critical Incident Journal Marking Guide**

- /2 Describes the incident or event and is objective. Includes thoughts/feelings/perceptions.
- /3 Reflects on the incident/event. Describes why the incident was important and describes factors that influence actions/feelings.
- /4 Evaluates strengths and areas for improvement in self and own actions/reactions. Explains why strengths and areas for improvement were identified.
- /6 Describes significant learning that took place. Describes what would be done differently in the future. Describes teaching opportunities for peers or others. Provides current literature to support conclusions.

Total /15 with each journal being /5



## **LABS**

### **Lab 1 - Tracheostomy Care and Suctioning**

At the completion of Lab 1, the student will be able to:

1. During discussion demonstrate knowledge of tracheostomy care including
  - a. purpose
  - b. assessment of client with tracheostomy
    - i. respiratory status
    - ii. type and consistency of secretions
    - iii. condition of tracheostomy site
    - iv. oxygenation, hypoxia
    - v. aspiration
    - vi. teaching
    - vii. client and family coping
  - c. potential for infection and other risks in clients
  - d. treatment of dislodgment
  - e. use of ventilator equipment
2. Demonstrate tracheostomy care including:
  - a. asepsis
  - b. instillation, irrigation
  - c. cleanses site
  - d. changes dressing
  - e. inflates and deflates cuff
  - f. suctioning technique: insertion, rotation, withdrawal
3. Perform oropharyngeal and nasopharyngeal suctioning.

**Additional time and equipment will be available in the lab to review and practice previously learned skills in preparation for clinical agency experience.**

## Lab 2 - Care of Client Experiencing Epidural Analgesia

At the completion of Lab 3, the student will be able to:

1. Define epidural analgesia, anesthesia, and spinal analgesia. Discuss the differences between each. State the indications and contraindications for their use.
2. State the purposes of:
  - patient consent for procedures.
  - continuous and intermittent therapy
  - maintenance of IV infusion site
  - establishment of ECG and BP automatic monitoring devices
  - agency specific policies and certification
3. Discuss and demonstrate nursing care during the initiation of the therapy and during its duration:
  - positioning
  - aseptic field, gloving and masking
  - monitoring vital signs, sensory level, pain assessment
  - catheterization, intake and output measurement
  - oxygen and suction support
  - rationale for having naloxone at the bedside
  - use of antiemetics, antihistamines, opioid analgesics
  - rationale for absence of the use of alcohol in skin preparation
  - checking of continuous selected medication preparation solutions
  - contraindicated medications
4. Demonstrate understanding of the side effects, complications and risks associated with this therapy and the related nursing actions required:
 

-depressed respirations	-headaches
-hypotension	-pruritus
-oversedation	-inadequate analgesia
-catheter	-nausea and vomiting
-infection	-urinary retention
5. Discuss how the therapy is discontinued and the related nursing assessments and actions:
 

-positioning	-skin preparation
-catheter tip assessment	-dressing over site
-sensory assessment	