



DEPARTMENT OF Nursing Education and Health Studies

COURSE OUTLINE – NS 3950 A2/AC1

Fall, 2014 – Term 1

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PREREQUISITE(S)/COREQUISITE: Prerequisites: PZ 1510 , NS 2910, 2940, 2950. Pre- or corequisite: NURS 3900.

REQUIRED TEXT/RESOURCE MATERIALS:

1. Map of Theoretical Labs, Clinical Labs and Clinical Seminars (available on Moodle)
2. Graduate Competencies and Year-end Outcomes (Condensed) (available on Moodle)
3. Grade Descriptors (available on Moodle)
4. NS 3950: Evaluation of Nursing Practice (ENP) (available on Moodle)
5. Canadian Nurses Association (CNA) Code of Ethics (available on Moodle)
6. Mental Health Textbook

CALENDAR DESCRIPTION: **NURS 3950 Nursing Practice VI.** Practice focuses on restoration, rehabilitation and support (including health promotion and disease prevention) of clients across the

life span who are experiencing more acute variances in health. Practice occurs in homes, acute care settings, or in community-based settings.

COURSE DESCRIPTION:

This clinical course will provide students with the opportunity to assess community as client, and to work with clients experiencing mental health issues. Students will continue to incorporate health promotion, and all levels of prevention in nursing practice with clients, families, groups and/or aggregates. Nursing practice over a continuous block of time will occur in various community and/or acute care settings.

CREDIT/CONTACT HOURS: *7 (either term, 3-27c-1 in 7 weeks).

LEC: 0 SEM: 21 CLINICAL: 189 LAB: 7

DELIVERY MODES:

LABS:

Labs will be completed during orientation week. See orientation week schedule posted on 3rd year Moodle.

SEMINARS:

Seminars are every **Friday from 1130-1420 in room F309. Occasionally seminars will be held separately, you will be notified of the room.** Seminars are intended to be a “safe place” for students to discuss experiences from clinical practice. Please be prepared to discuss the meaning related to clinical experiences and how these relate to your professional practice. If weather does not allow travel, teleconferencing will be available. You are responsible to let your instructor know as soon as possible, preferably at least the day prior and provide a phone number so you can be called in. Make sure this is not a cell number, and the space is private in order to maintain confidentiality. One seminar will be held as an on-line discussion. Specifics will be posted on Moodle.

CLINICAL PRACTICE:

Clinical Practice will take place in agencies dealing with mental health issues in the community, acute care psychiatric setting, and/or an addictions detoxification setting. Clinical practice is considered to be **compulsory**. Absences will be dealt with according to guidelines for clinical/ lab absences, published in the Student Handbook. In the event of an **unavoidable absence**, students

are **required to notify the clinical instructor and clinical site as soon as possible**. In the rare instance the student will need to "make up" missed clinical time, the student may be responsible for reimbursing the costs of a clinical tutor.

*****AS SOON AS POSSIBLE BEFORE your mental health placement, you will call the agency field guide you have been assigned and make specific arrangements regarding agency orientation and scheduling. Important aspects of the program and expectations for you as a student within that setting will be reviewed with your field guide. The agencies will have a copy of your course outline and the methods by which you will be evaluated. The clinical instructor is responsible for student final evaluation grade based in part on feedback from your field guides*****

Clinical Learning Unit: Acute Care Psychiatry and Addiction (Detox) Units

A Clinical Learning Unit is a model of learning intended to encourage increased independence and integration into the area of acute care psychiatric nursing practice. Students will be expected to work semi-independently. Students will be 'adopted' by unit staff providing an opportunity to work directly with several different staff members throughout the clinical rotation. The common goal is to provide a safe learning environment for the student; each member of the team shares roles & responsibilities toward achieving this goal. These are outline in the CLU Fact Sheet (posted on Moodle).

1. As preparation for each clinical day, you are to familiarize yourself with the clients' demographic information, previous and present admissions, multidisciplinary assessments, diagnoses, treatment & plan of care.
2. Your daily activities are expected to include "normal unit" activities, such as case conference and groups when appropriate. **You will work 12 hour shifts days normally.**
3. Identification must be worn at all times. Professional staff is identified by their first name only. Dress code is modest casual wear. Scrubs are permitted; however please do not wear purple scrubs. Blue jeans, tight pants, shorts, exposed midriffs, and open-toed shoes are not permitted.
4. Only notebooks, care plans and drug guides are taken onto the unit. Coats, outdoor footwear, and food are to remain in a designated location. Lockers will be provided at the QE II.
5. A CLU binder is located in the nursing station/CCA Room containing documents, evaluation sheets, course outlines and other material pertinent to the placement.
6. The Clinical Placement Coordinator will provide you with a schedule.

Community Mental Health (CMH) Nursing Guidelines

1. As a student you will be expected to work with a field guide to meet course objectives. The instructor is available for consultation as required. However, you are not to lead process groups independently but may lead part of a group or session as directed by the field guide and when appropriate.
2. Students are expected to contact the field guide prior to the start of the clinical course to establish working hours and days. Sometimes evening shifts or groups are part of the clinical schedule set by the field guide.
3. Identification must be worn at all times. Dress code is modest casual wear. Blue jeans, tight pants, shorts, exposed midriffs, and open-toed shoes are not permitted.

Correctional Centers (Grande Cache or Peace River)

1. The student will work directly with an RN/RPN as you learn and practice the art of providing nursing care to individuals who are incarcerated.
2. Federal security forms must be complete prior to clinical practice and students meet the federal security requirements determined (Grande Cache). Clinical Placement Coordinator will facilitate the process.
3. Review immunization information, drug withdrawal symptoms/treatment, psychotherapeutics
4. Identification must be worn at all times. Professional staff is identified by first name only. Dress code is modest casual wear (Grande Cache Psychology) or scrubs (Peace River and Grande Cache Health Division). Blue jeans, tight pants, shorts, exposed midriffs, and open-toed shoes are not permitted. **No blue scrubs are to be worn.**

Community Project Guidelines: Community projects are an element of community mental health nursing practice. Projects arise from an identified need or concern within an agency. Projects help in breaking down large, long-term initiatives into smaller components that can be evaluated (Diem, 2005). According to Diem, projects have three general purposes:

1. Programming and evaluation of short-term health promotion/illness prevention strategies.
2. Informing agencies about a process to address an identified need.
3. Developing knowledge about community mental health issues.

Community mental health projects are an opportunity to explore nursing practice from a different viewpoint. You will have an opportunity to interact with clients but the focus is on primary prevention rather than secondary or tertiary care.

Community mental health projects in NS 3950 are generally identified by the agency. Students assist the agency in meeting short-term goals related to the project and provide results in the form of a final presentation. Projects vary in topic and students will be expected to carry out a number of responsibilities identified in the contract with the agency. Supervision of the project is done collaboratively with the agency and the instructor.

Students will work in pairs on projects. It is expected students will share responsibilities equally. A peer evaluation will be done at mid-term and at the end of the project. Peer feedback will be included in the determination of the assignment grade. The clinical agency contact will have input into the final evaluation of nursing practice (ENP).

COURSE OBJECTIVES:

Levels of Independence

In evaluating objectives, the following levels of independence will be used:

With assistance: The student requires direction and information.

With minimal assistance: The student requires *occasional* direction and information.

With guidance: The student requires clarification, prompting and confirmation.

With minimal guidance: The student requires *occasional* clarification, prompting and confirmation.

Independently: The student works mostly on his or her own and seeks information, clarification and consultation as appropriate.

Direction: Clinical tutor tells the student what to do, about what steps to take.

Information: Clinical tutor tells the student specifics about a concept or topic.

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

Prompting: Clinical tutor provides the student with a cue that answer is incomplete or incorrect and how to resolve the lack of information. A prompt is broader than a hint. Prompting is generally used to add breadth or depth.

Confirmation: Clinical tutor provides positive feedback for correct information and direction provided by the student.

Consultation: The student provides clinical tutor with information and/or direction and asks specific questions about the information or direction which the instructor confirms.

Occasional: The clinical tutor provides input every now and then.

OBJECTIVES:

Overarching statements:

Students are responsible to familiarize themselves with *Graduate Competencies and Year Outcomes (with Cross Reference to courses) 2013/14*. Attention must be given to the competencies that are identified as being relevant to NURS 3950.

Students must regularly refer to the document entitled *Graduate Competencies and Year-End Outcomes 2013/14*. Attention must be given to the Year 3 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 (2013) and all other CARNA standards
 - The CNA Code of Ethics for Registered Nurses (2008).
1. Demonstrate, with minimal guidance, the processes of self-directed learning, critical thinking, and context-based learning in a variety of community and/or acute care settings.
 2. Demonstrate, with guidance, the ability to practice in accordance with Year 3 competencies, as described in the document entitled: *Graduate Competencies and Year-End Outcomes 2013/14*.
 3. Demonstrate, with minimal guidance, the ability to manage restoration, rehabilitation, and support activities for clients experiencing mental health issues, in a in a variety of community and/or acute care settings.
 4. Demonstrate, with minimal guidance, the ability to provide evidence-based, competent nursing care to clients experiencing more acute variances in health, in a in a variety of community and/or acute care settings.
 5. With guidance assess the mental health needs of the community as client.
 6. Demonstrate the ability to integrate knowledge into clinical practice.

TEXTBOOKS:

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

Austin, W., & Boyd, M.A. (2010). *Psychiatric and mental health nursing for Canadian practice*. (2nd or 3rd ed.). Philadelphia, PA: Lippincott Williams & Wilkins.

Balzer-Riley, J. (2008). *Communications in nursing*. (6th ed.). Toronto, ON: Mosby.

*Or any interpersonal relationships text.

Diem, E., & Moyer, A. (2005). *Community health projects: Making a difference*. Philadelphia, PA: Lippincott, Williams & Wilkins. (Copies will be provided to project students)

TRANSFERABILITY:

** This course is part of a block transfer agreement with the University of Alberta in the Collaborative BScN Program. Admission to 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, 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.**

GRADING CRITERIA:

GRADING CONVERSION CHART			
ALPHA GRADE	PERCENTAGE CONVERSION (%)	4-POINT EQUIVALENT	DESCRIPTOR
A+	95 – 100	4.0	Excellent
A	90 – 94.9	4.0	
A-	85 – 89.9	3.7	Very Good First Class Standing
B+	80 – 84.9	3.3	
B	75 – 79.9	3.0	Good
B-	70 – 74.9	2.7	
C+	66 – 69.9	2.3	Satisfactory
C	63 – 65.9	2.0	
C-	60 – 62.9	1.7	
D+	55 – 59.9	1.3	Poor
D	50 – 54.9	1.0	Minimal Pass
F	0 – 49.9	0.0	Failure
WF	0	0.0	Fail Withdrawal after the deadline

Assignments will be given an alpha grade according to the grading criteria for each assignment. Grades for each assignment will be translated into a 4-point equivalent; this number will be multiplied by the weighting of the assignment to determine a score. The scores for each assignment will be added together for a total score in the course. This score will be used to determine the final alpha grade for the course (A+ -- >F). **Students MUST pass the ENP in order to pass the course. If a student receives an “F” in any of the ENP criteria it constitutes a clinical failure on the ENP. 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.**

EVALUATIONS:

REQUIRED LEARNING EXPERIENCES

In order to pass NURS 3950, 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 and/or acute care settings which will include nursing care of clients, families, groups and/or aggregates experiencing more acute variances in mental health.
2. Participate in site-selected lab activities.
3. Participate in therapeutic conversations with clients with mental health issues.
4. Using a primary care focus, examine mental health needs of a community group.
5. Participate in health promotion, and/or harm reduction, and/or illness prevention programs with clients, families, groups and/or aggregates experiencing more acute variances in mental health.
6. Collaborate with client, family, community, nurses and members of other disciplines.

ENP REQUIRED EVALUATION:

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

1. ENP plus 1 other assignment:
 - To encourage the development of self-reflective practice, it is recommended client preparation, reflective practice, nursing care, and learning plans be evaluated through discussion during the clinical day and clinical seminars.
2. 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 indirect or direct 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.

MIDTERM EVALUATIONS:

Midterm evaluations will occur from approximately **Week of September 29th – October 2nd, 2014.**

The clinical instructor, in consultation with individual students and/or field guides, will arrange a date and time to come to the clinical placement to meet with both the student and the field guide together. **For your midterm evaluation, please be prepared to discuss both your strengths and areas for improvement.** You are not obligated to complete the ENP, but you are expected to review your progress according to the ENP in preparation for your mid-term evaluation.

FINAL EVALUATIONS:

Final evaluation feedback from field guides will occur from approximately **October 14th – 16th, 2014.** During this time, the clinical instructor, in consultation with individual students and/or field guides, will arrange a time to collect final feedback from field guides.

Students are required to complete and submit an ENP by October 17th, 2014 at 1630. Final written evaluations will be arranged with your instructor at which time the final ENP grade will be assigned.

ASSIGNMENTS:

Field Notes: Due: September 19th, 26th, October 3rd, 10th, 17th at 1630

Daily field notes are to be posted on Moodle on a **weekly** basis.

Field notes are a point form overview of your experiences including:

1. Number of clients along with their diagnosis/presenting problem.
2. Titles of videos, books, or other resources utilized.
3. Names of in-services, groups, or conferences attended.
4. Other daily routines or experiences.
5. **Include your total weekly and cumulative clinical hours.**

Weekly Project Summaries: Due: September 19th, 26th, October 3rd, 10th, 17th at 1630 (Project Students Only) – specifics in guidelines posted on Moodle

1. Project timelines and weekly evaluation of goals.
2. Peer evaluation
3. Activities and accomplishments
4. **Include your weekly and cumulative clinical hours**

Journal Assignments: Due: September 29th, and October 14th, at 0830. The week of October 6-10, 2014 will be having an on-line discussion in lieu of seminar. Specific instructions on the discussion will be posted on Moodle.

Journal assignments are to be posted on Moodle. A comprehensive journal entry includes:

1. Briefly describe a significant clinical experience or an event that triggered your curiosity about a topic.
2. Reflect on the impact this clinical experience or event has on your personal and professional growth.
3. Conduct values and beliefs clarification related to the experience, including development of emerging values and beliefs.
4. Integrate theoretical learning into practice by including relevant research and resources.
5. Acceptable grammar, spelling, and APA formatting (i.e. title page; referencing).

Community Project Assignment: Due Dates:

Initiation & Working Phase (including timeline and bibliographies): September 26th, 2014 at 0830.

Synthesis Phase: October 10th, 2014 at 0830.

Presentation: Tentative date of October 17th, 2014 (Room to be announced)

The purpose of the project assignment is to systematically assess and analyze results of an aggregate population. Some agencies will require flexibility in your time schedule in order to be able to make direct contact with the target population. The following components will be included in the project (**Grade Descriptor posted on Moodle**):

1. A timeline for completion of goals and responsibilities – one page.
2. Weekly evaluation of project goals.
3. 1-3 page summaries of the Initiation and Working phases of the project.
4. Bibliography of 4 articles related to the project. Each bibliography should be 1 page in length.
5. A 5-7 page summary of the synthesis phase of the project.
6. Final presentation of project results to the agency, key informants, identified relevant community agencies/service providers, instructor, and peers.
7. Use acceptable grammar, spelling, and APA formatting (i.e. title page; referencing).
8. Please submit all assessment data/notes, and survey questionnaires completed during interviews with clients and key informants. Please **ensure the client's anonymity** is maintained **by using initials** in the written assignment.

Process Recording Assignment: Due: October 10th, 2014 by 1630

The purpose of the process recording is to systematically analyze a therapeutic interaction with a client. (**Grade Descriptor Posted on Moodle**)

Process:

The student will obtain consent to record a therapeutic interaction. The conversation will be audio taped. The process recording will include **four consecutive** interchanges between the client and the nursing student **starting with the student response**. Only transcribe the four interchanges you have chosen to analyze. **Audiotape, transcription, and written assignment are to be submitted in hardcopy.** Please **ensure the client's anonymity** is maintained **by using initials** in the written assignment. Following marking, audiotapes are to be erased by the student to ensure client confidentiality. Recording devices are available from your instructor.

Written Components of the Process Recording: Grade Descriptor (posted on Moodle)

1. Provide a concise history of the client including information relevant to your interview/session.
2. Critically describe the setting the conversation occurred, including necessary suggestions for change.

3. Identify the goal(s) including rationale for the interaction.
4. Chronologically and line-by-line document and **analyze each of the four interchanges** including the following information:
 - i. Student Response: includes verbal & non-verbal communication.
 - ii. Client Response: includes verbal & non-verbal communication.
 - iii. Student's thoughts and feelings during each interchange.
 - iv. Identify the communication technique used including analysis of its effectiveness along with rationale.
 - v. Analysis of each interchange including critical evaluation of the client's response as well as an appropriate alternative student response including rationale.

Note: Alternative student responses are to be provided for every interchange.

5. Use acceptable grammar, spelling, and APA formatting (i.e. title page; referencing).

COURSE EVALUATION:

Assignments	Weighing
Community Project (Applies to two students assigned to Project) <ul style="list-style-type: none"> • Written summary of initiation & working phase and timeline & bibliography • Written summary of synthesis phase and presentation 	10% 20%
Process Recording	30%
Evaluation of Nursing Practice (ENP): <ul style="list-style-type: none"> • Field Notes or Weekly Evaluation of Project • Journals 	70%
Project plus ENP: OR Process Recording plus ENP:	Total: 100%

STUDENT RESPONSIBILITIES:

LATE ASSIGNMENT POLICY:

All assignments are 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 a letter grade for each working day an assignment is submitted after the due date will be deducted from the final grade. For example, a paper scored at B+ would receive an adjusted grade of B 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. If the paper is

passed in after a weekend the weekend will count as one working day. When submitting assignments electronically, it is the student's responsibility to ensure the assignment has been received. Please speak with your clinical instructor to clarify assignment submission requirements.

STATEMENT ON PLAGIARISM AND CHEATING:

Refer to the Student Conduct section of the College Admission Guide at or the College Policy on Student Misconduct: <http://www.gprc.ab.ca/programs/viewcatalog.7.-1.1018.html> Plagiarism and Cheating 2014-15 GPRC Calendar.

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

COURSE SCHEDULE/TENTATIVE TIMELINE:

The Clinical Placement Coordinator will provide you with a detailed schedule of your clinical practice.

Orientation: September 4th, 5th, 8th and 9th, 2014. A detailed orientation schedule will be available on Moodle.

Last Day to Drop with Refund: September 18th, 2014

Last Day to Withdraw with Permission: October 3rd, 2014

* Originally developed by the Clinical Experience Development Committee

Revised by the Learning Experiences Development Committee, April 2010

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