SAULT COLLEGE OF APPLIED ARTS AND TECHNOLOGY

SAULT STE. MARIE, ONTARIO

COURSE OUTLINE

COURSE TITLE: Nursing Practice VI

CODE NO. :   NURS4084   **SEMESTER:**   7

PROGRAM: North Eastern Ontario Collaborative Nursing Program (NEOCNP)

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APPROVED: "Lucy Pilon"

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                    CHAIR   **DATE**

TOTAL CREDITS: 4

PREREQUISITE(S):   NURS 3007, 3066, 3094, 3206, 3416

HOURS/WEEK: 3   3

Change, challenge and complexity characterize the context in which nursing is now practiced and will be practiced in the future. The predicted higher expectations will require the entry-level practitioner to practice more independently, and work safely with a wider range of clients, within a greater variety of practice settings and across the full continuum of care. (Harrington, 1997, CNO Communique)

I. COURSE DESCRIPTION:

This nursing practice experience focuses on the actualization of the nurse as a professional. By critically reflecting on clinical experiences, learners will experience the significance of their role as generators and disseminators of nursing knowledge in shaping and responding to the challenges of health care in our society.

II. LEARNING OUTCOMES AND ELEMENTS OF THE PERFORMANCE:

ENDS-IN-VIEW

By the end of this course, students will:

- Value and internalize educational experiences and program philosophy in a dynamic health care and societal environment.
- Demonstrate a commitment to ongoing professional development through collaboration (colleagues, faculty and preceptors).
- Visualize and actualize self as a professional nurse.
- Demonstrate advanced critical thinking and reflection with respect to nursing care and roles in complex, reality-based situations.
- Recognize the relationships between participants in a multi-disciplinary team.
- Engage in collaborative practice.
- Integrate diverse knowledge bases to direct complex nursing care.

PROCESS

The learning context will include in class and on-line discussion as well as the nursing practice settings in either an acute care (in-patient) or community based environment. Collaboration with faculty, colleagues and clinical partners (Preceptors) is an integral component to the learning process. It is the intention of the faculty to foster participants' problem solving approaches as they strive to assist clients to achieve desired health outcomes. Case studies will form the basis for seminar discussion.

While applying a problem solving approach, participants will demonstrate various skills required for critical thinking, clinical reasoning, effective and productive interpersonal communication, resource identification and technical competency. The course Professor's role is that of a facilitator so that students may fully explore the complexities and types of problems that may arise in clinical practice.

III.   CONCEPTS:

The foundational concepts for this course include:

Praxis	Change
Leadership	Professionalism/Competence/Accountability
Collaboration	Self as Nurse
Practice Context and Culture	Caring
Health Promotion	Knowledge
Evidence based practice	

IV.   REQUIRED RESOURCES/TEXTS/MATERIALS:

Required Text:

Lewis. S. L. (2007) Virtual *clinical excursions for medical-surgical nursing (*7th ed.).   St. Louis:
        Elsevier/Mosby.

Required Documents

Canadian Nurses Association (2008). Code of Ethics for Registered Nurses:
        http://www.cna nurses.ca/CNA/documents/pdf/publications/Code_of_Ethics_2008_e.pdf

College of Nurses of Ontario (2009). Compendium of Standards of Practice for Nurses
        in Ontario (3rd Edition). http://www.cno.org/pubs/compendium.html

College of Nurses of Ontario (2008). National Competencies in the context of entry
        level Registered Nurse Practice.
        http://www.cno.org/docs/reg/41037_EntryToPracitic_final.pdf

College of Nurses of Ontario (2008). Registering as a nurse in Ontario.
        http://www.cno.org/docs/reg/44036_RegAsNurse.pdf

Recommended Texts

DiCenso, A., Guyatt, G. and Ciliska, D. (2005). *Evidence-based nursing. A guide to
        clinical practice.* Philadelphia: Elsevier Mosby.
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Marshall-Henty, J. & Bradshaw, J. (Eds.). (2006). *Your guide to short answer questions on the
        CRNE.* Toronto, ON: Elsevier Canada.

McIntyre, J., Thomlinson, E., & McDonald C. (2006). *Realities of Canadian nursing:
        Professional, practice, and power issues* (2nd ed.)*.* Philadelphia: Lippincott, Williams,
        and Wilkin.

Saxton, D., Nugent, P., & Pelikan, P. (2003). *Mosby's Canadian comprehensive review of
        nursing* (2nd ed.). Toronto, ON: Elsevier Science Canada.

It is strongly recommended that you also look at other available Canadian RN exam preparation guides, such as *Mosby's Comprehensive Review of Nursing* (Canadian Version).

Recommended Articles

Delaney, C. (2003). Walking a fine line: Graduate nurses' transition experiences during orientation. *Journal of Nursing Education*, 42(10), 437-443.

McErlane, K. (2006). Managing conflict in the clinical setting: A case scenario. *Journal of Nursing Education*, 45(4), 142.

Paramonczyk, A. (2005). Barriers to implementing research in clinical practice. *The Canadian Nurse*, 101(3), 12-15.

Recommended websites

Canadian Nurses Association: http://www.cna-nurses.ca
College of Nurses of Ontario: http://www.cno.org
Registered Nurses Association of Ontario (RNAO) best practice guidelines:
        http://www.rnao.org
National Guideline Clearinghouse (public resource for evidence-based clinical practice guidelines): http://www.guideline.gov

Google Search: http://scholar.google.com

Online Data Bases

It is expected that students will access recent peer-reviewed journal articles, necessary legislation and current evidence based reviews and practice guidelines. Be sure to access online data bases, such as: **Proquest, Ovid, CINAHL, Medline, Cochrane Library, EBSCO host.**

Other resources (i.e.,agency policy and procedures, etc.) are also available in the acute care and community settings. These resources should be explored fully during your clinical placement.

It is expected that you will also regularly access your textbooks from previous courses as required (i.e., Medical Surgical Nursing, Mental Health Nursing, Maternal-Child Nursing, Community Nursing, Pharmacology, Physical Examination & Health Assessment, Pathophysiology, Pediatrics, Teaching and Learning, Research, etc.).

The following will be helpful

- Mosby's Comprehensive Review of Nursing (Cdn version)
- The CNA Review
- Standards of Practice for Registered Nurses and Registered Practical Nurses
- CNO Documents and RNAO Best Practice Guidelines
- Standards for the Therapeutic Nurse-Client Relationship

Be advised that additional resources are available in the library, acute care facilities and in the community setting. These should be explored fully.

V.   CLINICAL EXPERIENCE: *Please read this carefully*

Students will be partnered with a **Clinical Preceptor** in the in-patient or community practice setting. The role of the Clinical Preceptor, who is a Registered Nurse, is to mentor the student in the practice setting and to participate in both the midterm and final evaluation of the student, from a professional practice viewpoint. Students will also be assigned a **Faculty Advisor** from the College The role of Faculty Advisor is to: (a) ensure that the student has realistic measurable objectives for the practice experience by assisting them in developing an appropriate learning plan at the beginning of the clinical placement, (b) monitor the student's clinical practice experience hours, (c) facilitate communication between the student and Clinical Preceptor, (d) attend at least one of the student's formal clinical evaluations (Midterm or Final), (e) ensure that all clinical placement learning objectives of the student are being met, and (f) ensuring that all standards of professional practice are upheld throughout the clinical placement.

It is imperative students communicate with their faculty advisor in the first week of the semester in order to establish a working relationship and outline a plan for future communication. It is also expected that the student will make contact with their clinical partner (Preceptor) by the third week of September. Students should **draft a learning contract** that reflects both personal and course (from all first term, year 4 nursing courses) related learning objectives, and the means that the student will employ to attain and evaluate these objectives. A formal clinical evaluation tool will be provided to the student so that program objectives are also met. **Regardless of the setting, students must speak with their faculty advisor and discuss their learning objectives in the first week of starting their clinical time for NURS 4084.** Breach of this course policy may result in immediate removal from the clinical setting for unprofessional behavior.

Students are expected to follow their preceptor's schedule as much as possible. Wednesday through Sunday are possible clinical days (Wednesday, Thursday, Friday, Saturday, & Sunday,). Mondays & Tuesdays have been set aside as class time in term 1 of Year 4.Students are to plan their schedules accordingly. WITHIN **ONE WEEK OF BEGINNING THE CLINICAL EXPERIENCE,** the student must submit, to the faculty advisor and clinical preceptor, a schedule specifying hours for clinical practice. It is the responsibility of the student to ensure that changes to this schedule are reported and recorded. Failure to provide documentation of clinical hours will result in immediate removal from the clinical setting. **Failure to update the Faculty Advisor of changes made to the practice schedule will also be considered unprofessional behavior.** These expectations will be strictly enforced.

Clinical Placement Hours

All students are expected to complete a minimum of __200 hours__ in the clinical setting.

Students must refrain from using client names, preceptor or other staff names and agency names in their written communications such as journals and assignments. Students are to follow the dress code for clinical practice as outlined in the Student Manual. In the clinical practice setting, students are responsible to the client, preceptor, agency, AND to the College. Unsafe practice, unprofessional behavior, or infractions
with respect to accountability and responsibility are grounds for removal from the clinical setting.

VI.   EVALUATION PROCESS AND GRADING SYSTEM:

A passing grade of 60% is required for Nurs 4084 and the student must also achieve a satisfactory level of competence in the practicum portion.

In order to facilitate the integration of previous learning, students will participate in activities and or discussions where various topics will be examined. Students will be expected to participate by identifying areas where additional learning is needed. Students will submit a clinical portfolio the contents of which are detailed below. A final examination will be written during the examination period.

Success in NURS 4084 will be determined through the following evaluative mechanisms.

	Evaluation Strategy	**Date Due**	**% Final Grade**
1	Clinical Evaluations (Midterm & Final)		Pass / Fail
2	Bulletin Board Posting		20%
3	Response to Peer Bulletin Board Posting		5%
4	Clinical Practice Portfolio: Including: a) Clinical Placement Learning Plan **b)** 2 reflective journals **(due towards the middle and end of clinical practice)** c) Case Study and Nursing Care Plan **(TO BE HANDED TO COURSE PROFESSOR NOT TO INCLUDE THIS IN THE PORTFOLIO)**	Nov. 24th 2009	Satisfactory / Unsatisfactory Satisfactory / Unsatisfactory 35%
5	Final Exam	Date Scheduled by Registrar	40%

PLEASE NOTE: Failure to attain success in the clinical area, and/or failure to complete and submit bulletin board postings, clinical placement learning plans, journals, and all other written assignments or exams, constitutes failure to meet the requirements of this course and will result in failure in NURS 4084.

Description of Evaluative Mechanisms

CLINICAL PRACTICE

1. Midterm & Final Clinical Evaluations (Pass / Fail)

A formal **midterm evaluation** meeting is to be arranged by the student after completion of approximately **100 hours** of clinical practice. In addition to the student and his/her preceptor, the student's faculty advisor should also be in attendance at this midterm evaluation meeting (either in person, or by telephone for out-of-town placements). At this time, a determination is made as to whether or not the student has satisfactorily passed the midterm evaluation in order to plan and facilitate the remainder of the clinical learning experience.

Except in extenuating circumstances, all students must complete 200 hours in the clinical setting prior to the beginning of the examination period in December. A formal **final evaluation** between the student and preceptor is to be arranged by the student once all **200 hours** of clinical practice have been completed. Failure to complete clinical hours within the specified time period may result in a failure in NURS 4084.
The faculty advisor does not need to attend this final evaluation session unless it is deemed necessary and/or is preferred by the student or preceptor. During the final clinical evaluation meeting, a determination will be made as to whether or not all clinical expectations and learning objectives have been achieved by the student.

Once the final evaluation is complete, the student is responsible for collecting all signed copies of the completed midterm and final evaluation forms (Student copy **and** Preceptor copy). These forms are then submitted to the Faculty Advisor for final review. Once this review is complete, all evaluation forms (along with any additional comments / recommendations from the student's Faculty Advisor), are then forwarded on to the Course Professor. It is the responsibility of the Course Professor to determine the student's final **pass/fail grade** for the clinical component of NURS 4084.

**2. Evidence Informed Practice
     Bulletin Board Posting (20%)   Due: Monday Nov. 4th by 4p.m.2009**

In lieu of attending class throughout the term, students are required to instead, submit one bulletin board posting on the NURS 4084 WebCT bulletin board, at some time between September 30th and November 4th, 2009. The discussion board will be locked at 4p.m. November 4th 2009.

All bulletin board postings will be: (a) approximately 1000 words in length (i.e., 3 – 4 double spaced pages), and (b) substantially supported with contemporary, relevant literature.
So that each one of the below listed bulletin board topics is given equal coverage during this online classroom experience, students will be assigned to **one** discussion topic, in accordance to the first letter of their last name:

- Students with a last name beginning with **A – H,** only address **topic #1**

- Students with a last name beginning with **I – P,** only address **topic #2**

- Students with a last name beginning with **Q – Z,** only address **topic #3**

Topic #1 – Workplace Conflict Management

Although most of us do in fact have a strong desire to work sensitively and collaboratively with our patients and colleagues, workplace conflict often exists (i.e., lack of available resources, differences in personal philosophies and/or approaches to nursing practice, differences in opinion about what should be a priority, etc.), which make the achievement of this goal very complex. When not managed effectively, workplace conflict can invariably lead to tension between stakeholders (i.e., the health care agency, colleagues, and patients), which over time, can seriously undermine the delivery of quality patient care.

Thus, by drawing upon experiences from the actual practice setting, the aim of this bulletin board posting is to assist students in reflecting upon their own approach to conflict management. In sharing challenging workplace experiences with each other, it is hoped that students will be able to: (a) develop insight into some of the circumstances that are most likely to cause conflict between themselves and others, (b) take stock of their own conflict management style, and (c) envisage ways upon which individual conflict management skills can be improved in the future.

In this posting, students are required to provide a thorough analysis of a workplace conflict situation, encountered during the NURS 4084 practice experience, which they believe had the potential to compromise quality patient care. In accordance to the following marking scheme, each bulletin board posting must include an introduction, a detailed critical analysis / reflection, and a conclusion.

Marking Scheme Bulletin for Board Topic #1 – Workplace Conflict Management

EVALUATIVE CRITERIA	% of GRADE
Introduction • Provides a brief description of a workplace conflict situation • Outlines most relevant background information relating to the identified situation • Briefly explains how this situation may have compromised quality patient care	5%
Critical Analysis / Reflection Considers the following guiding questions: • What factors contributed to this situation? • What actions did you initially take when this situation occurred? • Were these actions in line with best practice? • What empirical knowledge informed you (or should have informed you) when this conflict initially occurred? (Makes a substantial reference to current research literature) • Were your actions (and the actions of others) in line with professional practice standards and the professional code of ethics for registered nurses? • What internal factors (i.e., personal values/beliefs, individual personality characteristics, preferred conflict management style) contributed to your response to this situation? • What were some of the consequences of your initial response to this situation, with respect to the patient, yourself, and others? • How might you have responded to this situation differently? (Explore some of the alternatives). • What are some of the potential consequences of these alternative responses, with respect to the patient, yourself, and others? • How is this experience similar to other experiences you have had as a student?	10%
Conclusion • Summarizes all key points • Explains how own behaviour might change if a similar situation is encountered in the future.	5%
Total Score	20%

Topic #2 – Transitioning from Student to Professional Nurse

In making the transition from student to Graduate Nurse, many of you will experience several mixed emotions. On one hand, this is a very exciting time, a time when you all should be feeling enormously proud of your hard work and what you have accomplished as students. On the other hand, this is also a very frightening time, a time when it is quite natural for you to be feeling rather anxious and insecure about your future role and responsibilities as a professional Registered Nurse. Rest assured in knowing, if you are in fact feeling a bit stressed right now, you are probably not alone. It is in fact well documented in the research literature that the first three months of employment as a Graduate / Registered Nurse, often represents the most stressful time in every nurse's career.

Thus, as you move ever so close to assuming your new role as a graduate nurse, and begin to realize the many imperfections of everyday nursing, recognize that there will be days when you feel completely totally overwhelmed. For some of you, coping with death and dying will be an emotionally difficult experience for which you feel totally unprepared to handle. For others, the realization of the true level of responsibility involved in nursing will be very daunting, particularly in light of how easily mistakes can be made and how severe the consequences to those mistakes can be. From a practical perspective, simply learning how to manage your time effectively while caring for a full patient case load, coping with the difficulties of doing shift work, and coping with the challenges often associated with becoming socialized and eventually accepted (or not accepted) into a specific nursing unit culture, can all leave you feeling emotionally drained and physically exhausted.

In light of all the above, the aim of this bulletin board posting is to provide students with an opportunity to critically reflect on their own transitional experiences. In sharing these reflections with each other, it is hoped that all students will be able to: (a) recognize and taking pride in what they have accomplished thus far in the BScN program, (b) take stock of their own individual strengths and limitations as novice nurses (i.e., what are you currently able/not able to do), (c) identify realistic goals for professional growth, (d) develop a personalized plan for future professional development, and (e) realize the true value of nursing by recognizing the powerful effect their work has on both themselves and their patients.

In this posting, students are required to provide a thorough analysis and reflection of a student to Graduate Nurse transitional experience, encountered during the NURS 4084 practice experience. In line with the following marking scheme, each bulletin board posting must include an introduction, a detailed critical analysis / reflection, and a conclusion.

Marking Scheme for Bulletin Board Topic #2
Transitioning from Student to Professional Nurse

EVALUATIVE CRITERIA	% of GRADE
Introduction • Provides a brief description of a student to Graduate Nurse transitional experience encountered during the NURS 4084 clinical practice experience • Outlines most relevant background information relating to the identified transitional experience • Briefly explains initial response to this experience	5%
Analysis / Reflection Considers the following guiding questions: • What factors contributed to this experience? • What actions did you initially take when this experience occurred? • What empirical knowledge informed you (or should have informed you) when this experience initially occurred? (Makes a substantial reference to current research literature) • Were your actions (and the actions of others) in line with professional practice standards and the professional code of ethics for registered nurses? • What internal factors (i.e., personal values/beliefs, individual personality characteristics) contributed to your response to this experience? • What were some of the consequences of your initial response to this experience, with respect to the patient, yourself, and others? • How might you have responded to this experience differently? (Explore some of the alternatives). • What are some of the potential consequences of these alternative responses, with respect to the patient, yourself, and others? • How is this experience similar to other experiences you have had as a student? • Have any professional growth / development goals evolved from this experience? If so, how will you realize these goals?	10%
Conclusion • Summarizes all key points • Explains how student behaviour might be different if faced with a similar situation in the future.	5%
Total Score	20%

Topic #3 – Applying Research Findings to Clinical Nursing Practice

Indeed, nursing research is meaningless unless it actually reaches and is applied by nurses at the point of care. Typically, Nurses are able to make links between research findings and nursing care by: (a) continuously seeking to identify specific clinical problems within their nursing unit or agency, (b) conducting systematic reviews of all relevant research literature relating to these identified problems, and (c) initiating appropriate steps for successful research utilization within their workplace (Potter & Perry, 2006).

In this posting, students will identify a practice based problem arising from their NURS 4084 clinical practice experience. Evidence of an appropriate search for an answer to this problem, which includes a reference list of resources used to develop the answer, must be provided.

In line with the following marking scheme, each bulletin board posting must include an introduction, a detailed analysis, and a conclusion.

Marking Scheme for Bulletin Board Topic #3 – Evidence Informed Practice

EVALUATIVE CRITERIA	% of GRADE
Introduction • Provides a well framed description of a clinical practice problem • Explains the context to which this problem has arisen • Outlines most relevant background information relating to the identified problem	5%
Analysis: Considers the following guiding questions Considers the following guiding questions: • Formulates an answerable, searchable research question relating to the identified clinical practice problem • Provides a review of the literature summarizing the best available evidence relating to the identified clinical problem • Provides an answer to the formulated research question, which reflects an evidence-based approach	10%
Conclusion • Summarizes all key points • Identifies limitations and/or gaps in the current literature • Makes recommendations for future nursing practice • Includes a detailed reference list	5%
Total Score	20%

PLEASE NOTE: Topics discussed on the bulletin board may also be represented on the final exam.

3. Response to a Bulletin Board Posting (5%)

In addition to submitting one bulletin board posting, students are also required to respond, in a substantial way, to at least one of the bulletin board postings submitted by their peers. Students can respond to any posting written within each of the three bulletin board topics listed above. The purpose of this activity is to provide students with an opportunity to: (a) critically reflect upon what is being written by others, and (b) share their own insights / perspectives derived from their own unique experiences, and (c) challenge each other's ideas, beliefs and/or approaches to clinical practice.

During this on-line activity, students are encouraged to pose critical questions for consideration by the entire class. However, while doing so students are expected to uphold the standards of professional nursing practice at all times (i.e., written responses are to be respectful, non-aggressive, objective, factual, and well supported with relevant contemporary literature).

All written responses must be submitted no later than **November 4th,** and, must be at least **500 words** in length (approximately 2 double spaced pages). All responses will be graded according to the following marking scheme.

Response to a Bulletin Board Posting Marking Scheme

Evaluative Criteria	% of Grade
Critically reflects upon peer bulletin board posting	2%
Challenges the ideas / beliefs / approaches to clinical practice of others	2%
Substantially supports comments / suggestions with recent relevant research literature	
Upholds the standards of professional practice (i.e., response is respectful, objective, etc.)	1%
Total Score:	5%

4. Clinical Practice Portfolio (Satisfactory/Unsatisfactory)
 (Submit to Faculty Advisor) Due date to be determined by faculty advisor

Portfolio
Learning contract

Students are to develop a learning contract that reflects: both personal and course related learning objectives (from all first term, year 4 nursing courses); Learning objectives need to be specific and measurable. The student needs to describe the means that he/she will employ to attain these objectives; and the evaluation criteria to be used. A formal evaluation tool will be provided to the student so that program objectives are also met.

REGARDLESS OF THE SETTING, STUDENTS MUST SPEAK WITH THEIR FACULTY ADVISOR AND DISCUSS THEIR LEARNING OBJECTIVES IN THE FIRST WEEK OF STARTING THEIR CLINICAL TIME FOR NURS 4084.

Submissions are evidence of meeting learning objectives. Submissions may take the form of Year 4 course assignments. The Clinical Portfolio is to include (a) Clinical evaluations, (b) The student's Clinical Placement Learning Plan, (c) Two Reflective Journals, and (d) A Case Study and Nursing Care Plan or conundrum analysis. The student needs to demonstrate praxis by explaining how this learning has changed or will change his/her practice. That is each submission requires a note as to how it relates or serves as evidence of learning.

(a) Clinical Placement Learning Plan (Satisfactory / Unsatisfactory)

Students are expected to develop a clinical learning plan, in collaboration with their preceptor and their faculty advisor. The first draft of this plan must be emailed to the faculty advisor by the end of week two. The template for this plan (included below), will be discussed in more detail during the first week of class. Based on feedback given from the Preceptor and Faculty Advisor, the student's Clinical Learning Plan must then be revised and resubmitted to the Faculty Advisor by no later than the third week of the Fall semester.

When developing the Practice Placement Learning Plan, students are encouraged to consider both their personal and course-related learning objectives. Students should also refer to the NURS 4084 Clinical Evaluation Form while developing learning objectives.

The following template provides a format for developing a learning plan for this clinical experience. Please ensure that learning objectives are specific, measurable, attainable, realistic and timely (SMART).

Clinical Learning Plan Template

LEARNING OBJECTIVES	LEARNING STRATEGIES AND RESOURCES	EVALUATION CRITERIA	EVIDENCE OF MEETING OBJECTIVES
What I need and want to learn based on an assessment of my needs and the availability of specific learning experiences (must also reflect course ends-in-view) (Think SMART)	Specifically, what will I do to meet my learning objectives? What resources will I use to achieve these objectives?	How will I demonstrate that I have achieved my objectives?	Who will evaluate my evidence? When? Based on what criteria?

(b) Reflective Journals (Satisfactory / Unsatisfactory)

All students are required to submit **two reflective journals** to their Faculty Advisor for review and comment. The first journal is to be submitted prior to the student's midterm evaluation, and the second, submitted prior to the final evaluation. If students so desire, they may also share their reflective journals with their Clinical Preceptor for information purposes only. All reflective journals are to address the student's personal progress toward the accomplishment of learning objectives, as identified within their Clinical Placement Learning Plan. Entries must be evidence based – that is supported with references from the literature. The final journal should be a summary of how learning outcomes were achieved overall with examples. These reflective journals, along with other written work in the student's Clinical Practice Portfolio, will later serve as documentary evidence of the student's achievement of each of the NURS 4084 course Ends-In-View.

(c) Case Study and Nursing Care Plan (35%)

For students in the Acute Care Setting:

Structure of each submission

A. Case Study

The **Case Study** will clearly describe an actual client-nurse scenario/interaction or work situation which the student encountered during the NURS 4084 clinical practice placement. This will serve as the basis for your case study presentation. It will include a summary of the student's role in the interaction and provide all relevant information about the client. The case study will include all relevant raw data and demonstrate a detailed analysis that identifies all actual and potential client health challenges **(Maximum 4 pages).**

Based on findings from the case study, the student will then develop a **Nursing Care Plan** which includes: (1) a summary of all key assessment data, (2) a list of all relevant nursing diagnoses, (3) a list of appropriate client goals (short and long term desired outcomes), (4) a list of all appropriate nursing interventions, and (5) an evaluation.

Choose the highest priority problem (as identified in collaboration with the client and family--be sure to explain this process). Your interventions must be individualized for the client and family.They should not be taken directly out of a book. You must include references for rationales, interventions and analysis. The concept of **EVIDENCE BASED PRACTICE** should prevail throughout this entire assignment. Analysis of the situation should be **done using an organized problem-solving method** such as the Nursing Process. Other frameworks that can be used to analyze elements of the situation are Nursing Theories; Communication Models; Leadership Models; Management Models; Change Theories; Nursing Care Delivery Models; Health Promotion Models; etc.

PLEASE NOTE: The concept of best practice should prevail throughout this assignment. Additionally, students should not copy their care plan interventions directly out of a book. Rather, care plans should be individualized, making reference to the literature where appropriate. There is **no page limitation** on the nursing care plan section of this assignment.

For students in the Community setting:

Submissions need to be either **ONE** Conundrum or **ONE** Case Study

   B. Conundrum ("an intricate or difficult problem" - Merriam-Webster Dictionary definition, 2006)

Guidelines for writing up a Case Study or Conundrum

   1. Introduction – Short introduction to explain purpose of the assignment
   2. Description
         a. Describe the client-nurse scenario/interaction or work situation
         b. Explain the situation clearly
         c. Note your role in the scenario, interaction or situation
         d.   Mention any pertinent information about the patient and family.

   3. Analysis of the situation should be done using an organized problem-solving method such as the Nursing Process. Other frameworks that can be used to analyze elements of the situation are Nursing Theories; Communication Models; Leadership Models; Management Models; Change Theories; Nursing Care Delivery Models; Health Promotion Models; etc.
   4. Depending on the model used, you can use headings based on elements of the model, (eg. Nursing Process – Assessment, Diagnosis, Planning, Implementation, and Evaluation).

   Conundrum – content & format

         o   A conundrum is "an intricate or difficult problem" -Merriam-Webster Dictionary definition, 2006
         o   Follow #1-4 as noted above
         o   Analyze the situation using a theoretical framework as noted in #3.
         o   Develop strategies for resolution of the issue, conflict or problem.
         o   Utilize evidenced based findings (scholarly works or guidelines) from the literature to support your analysis of this problem and the development of strategies.

   5. Reflective practice section –how your practice will improve due to this experience should be noted.
   6. Conclusion –brief summary of what was accomplished in this assignment.
   7. Reference list

The following template may be used as a guide for both the case study/conundrum and nursing care plan.

Case Study and Nursing Care Plan Template

CASE STUDY
Description of Client-Nurse Scenario: Describe the context within which your interaction with the client occurred, including a brief summary of all relevant background information. **Client Information Data Base:** Provide a written summary of all relevant client information, derived from both primary (i.e., the client) and secondary sources (i.e., family, other health professionals, medical records, etc). Be sure to include the following: (a) a comprehensive health history, (b) all relevant physical assessment data, (c) all relevant diagnostic and laboratory data, and (d) all other relevant information pertaining to the client's values, goals and expectations regarding health care. When recording data, pay close attention to the facts and be as descriptive as possible while using accurate medical terminology. **(maximum 4 pages for this section)**

NURSING CARE PLAN				
Assessment	**Nursing Diagnosis**	**Planning**	**Implementation**	**Evaluation**
Cluster all **key** information from the larger client information data base Focus here is on any client function(s) that require support and assistance for recovery	Statement of the client's actual or potential responses to all identified health challenges. Statements must use accurate nursing diagnosis terminogy.	Provide a list of all Client desired outcomes (objectives) Please note: Objectives must be observable, measurable, and realistic	Provide a list of all nursing interventions that will be employed to assist in realizing established client objectives / desired outcomes	Provide a written summary of actual client outcomes Ask yourself: Was the Nursing Care Plan successful? If not, what other nursing interventions need to be employed?

The Case Study / Nursing Care Plan will be evaluated using the following marking scheme:

Marking Scheme for Case Study and Nursing Care Plan Assignment

EVALUATIVE CRITERIA	% of GRADE
Case Study: • Provides a clear description of all relevant background information and a description of the student's role in client care • Provides a thorough summary of all relevant client information which includes: (a) a comprehensive health history, (b) a comprehensive physical assessment, (c) a summary of all relevant diagnostic and laboratory data, and (d) a summary of client values, goals, expectations regarding health care • Demonstrates appropriate use of medical terminology	17.5%
Care Plan: • Reflects a family centered approach to problem solving • Clearly identifies priority health challenges from health assessment data • Uses appropriate nursing diagnosis terminology • Clearly identifies appropriate client goals/objectives, which are observable, measurable, and realistic • Suggested nursing interventions are appropriate and reflect best practice • Demonstrates a thorough evaluation of the nursing care plan and makes appropriate recommendations for further interventions and/or follow-up if necessary	17.5%
Total Score	35%

5. Final Exam (40%)

The final exam will be a combination of multiple choice questions and case study analyses. The date, time and location for the NURS 4084 final exam will be determined by the Registrar.

PLEASE NOTE: All in-class and on-line discussions will form the basis for questions on the final exam. Thus, it is **strongly** recommended that students endeavor to attend all scheduled on-campus classes at the beginning and end of term, and pay close attention to all items discussed on the NURS 4084 WebCT Bulletin Board throughout the term.

The following semester grades will be assigned to students:

Grade	Definition	Grade Point Equivalent
A+	90 – 100%	4.00
A	80 – 89%	4.00
B	70 - 79%	3.00
C	60 - 69%	2.00
D	50 – 59%	1.00
F (Fail)	49% and below	0.00

CR (Credit)	Credit for diploma requirements has been awarded.
S	Satisfactory achievement in field /clinical placement or non-graded subject area.
U	Unsatisfactory achievement in field/clinical placement or non-graded subject area.
X	A temporary grade limited to situations with extenuating circumstances giving a student additional time to complete the requirements for a course.
NR	Grade not reported to Registrar's office.
W	Student has withdrawn from the course without academic penalty.

VII.   SPECIAL NOTES:

Retention of Course Outlines:
It is the responsibility of the student to retain all course outlines for possible future use in acquiring advanced standing at other post-secondary intuitions.

Course Outline Amendments:
The professor deserves the right to change the information contained in this course outline depending on the needs of the learner and the availability of resources.

Substitute course information is available in the Registrar's office.

Disability Services:
If you are a student with a disability (e.g. physical limitations, visual impairments, hearing impairments, or learning disabilities), you are encouraged to discuss required accommodations with your professor and/or the Disability Services office. Visit Room E1101 or call Extension 2703 so that support services can be arranged for you.

Prior Learning Assessment:
Students who wish to apply for advance credit transfer (advanced standing) should obtain an Application for Advance Credit from the program coordinator (or the course coordinator regarding a general education transfer request) or academic assistant. Students will be required to provide an unofficial transcript and course outline related to the course in question. Please refer to the Student Academic Calendar of Events for the deadline date by which application must be made for advance standing.

Credit for prior learning will also be given upon successful completion of a challenge exam or portfolio.

Substitute course information is available in the Registrar's office.

Communication:
The College considers *WebCT/LMS* as the primary channel of communication for each course. Regularly checking this software platform is critical as it will keep you directly connected with faculty and current course information. Success in this course may be directly related to your willingness to take advantage of the *Learning Management System* communication tool.

When contacting the course professor via email, learners are to use *WebCT/LMS* rather than other email addresses. It is unexpected that the course professor will respond to emails outside of College office hours. If learners wish to meet with the course professor outside of scheduled classes, appointments can be requested by any means such as in person, voice mail, or email.

Plagiarism:
Students should refer to the definition of "academic dishonesty" in *Student Code of Conduct.* A professor/instructor may assign a sanction as defined below, or make recommendations to the Academic Chair for disposition of the matter. The professor/instructor may (i) issue a verbal reprimand, (ii) make an assignment of a lower grade with explanation, (iii) require additional academic assignments and issue a lower grade upon completion to the maximum grade "C", (iv) make an automatic assignment of a failing grade, (v) recommend to the Chair dismissal from the course with the assignment of a failing grade. In order to protect students from inadvertent plagiarism, to protect the copyright of the material referenced, and to credit the author of the material, it is the policy of the department to employ a documentation format for referencing source material.

Student Portal:
The Sault College portal allows you to view all your student information in one place. **mysaultcollege** gives you personalized access to online resources seven days a week from your home or school computer. Single log-in access allows you to see your personal and financial information, timetable, grades, records of achievement, unofficial transcript, and outstanding obligations, in addition to announcements, news, academic calendar of events, class cancellations, your learning management system (LMS), and much more. Go to https://my.saultcollege.ca.

Electronic Devices in the Classroom:

Students who wish to use electronic devices in the classroom will seek permission of the faculty member before proceeding to record instruction. With the exception of issues related to accommodations of disability, the decision to approve or refuse the request is the responsibility of the faculty member. Recorded classroom instruction will be used only for personal use and will not be used for any other purpose. Recorded classroom instruction will be destroyed at the end of the course. To ensure this, the student is required to return all copies of recorded material to the faculty member by the last day of class in the semester. Where the use of an electronic device has been approved, the student agrees that materials recorded are for his/her use only, are not for distribution, and are the sole property of the College.

Cell phone ring tones must be turned off during classes. Laptops are welcome for class related activities only.

Tuition Default:

Students who have defaulted on the payment of tuition (tuition has not been paid in full, payments were not deferred or payment plan not honoured) as of the first week of *November,* will be removed from placement and clinical activities. This may result in loss of mandatory hours or incomplete course work. Sault College will not be responsible for incomplete hours or outcomes that are not achieved or any other academic requirement not met as of the result of tuition default. Students are encouraged to communicate with Financial Services with regard to the status of their tuition prior to this deadline to ensure that their financial status does not interfere with academic progress.

PLEASE NOTE: All in-class and on-line discussions will form the basis for questions on the final exam. Thus, it is **strongly** recommended that students endeavor to attend all scheduled on-campus classes at the beginning and end of term, and pay close attention to all items discussed on the NURS 4084 WebCT Bulletin Board throughout the term.

NURS 4084: Weekly Learning Activities & Assignment Due Dates

Week	Date	Learning Activities / Assignment Due Dates
1	Sept 9	• **All students required to convene on-campus** • **Location**: Room L1120; **Time**: 1000-1330 hrs • Overview of NURS 4084; Small Group Case Study Analysis; Student Placements
2	Sept 14-18	• Contact Clinical Preceptors to organize date / time for clinical orientation • Submit first draft of Clinical Learning Plan to Clinical Preceptor and Faculty Advisior • May commence clinical placement –goal is to complete all 200 hours of clinical practice within a12 week time frame (Sept 16- Dec 6).
3	Sept 21-25	• Revise / resubmit final copy of clinical learning plan to clinical preceptor and faculty advisor
4	Sept 28 - Nov 4	• Commence WebCT Bulletin Board postings (and peer responses)
5	Oct 5-9	• Submit Reflective Journal #1
6	Oct 12-16	• Monday (Oct 12th) Thanksgiving Day • Midterm Clinical Evaluation with Preceptor & Faculty Advisor (after completion of approximately 100 hours clinical practice)
6	**NOV. 24**	• Submit an electronic copy of Case Study / Nursing Care Plan to course professor via email (hard copy to also be included in clinical practice portfolio)
7	Oct 26-30	• **BScN Study Week**
8	Nov 4	• All WebCT Bulletin Board postings (and peer • responses) to be completed by the end of this week
9	Nov 27	• Submit Reflective Journal #2 • Final Clinical Evaluation with Preceptor (Faculty Advisor attendance optional) • Completion of all 200 hours of clinical practice by end of this week
10	Dec 7	• All clinical evaluation forms submitted to Faculty Advisor • Submission of Clinical Practice Portfolio to course professor
11	Dec 9	Last day of class

Date/Time/Location for Nurs 4084 Final Exam: TBA later