UNIVERSITY OF ALBERTA
COLLABORATIVE BACCALAUREATE
NURSING PROGRAM
KEYANO COLLEGE

COURSE SYLLABUS

NURSING 207

Introduction to Nursing Practice

January 9, 2017 – April 13, 2017

Instructors:

Group A – Tristan Schindlbeck, BScN, RN
Group B – Natalie McMullin, BScN, MN, RN
Group C – Andrew Waddington, BN, ACCN-ICU, BKin, RN

R: 2016/12/20
# NURSING 207
## Course Outline

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NURSING 207
NURSING PRACTICE III
COURSE OUTLINE

CALENDAR STATEMENT

NURS 207 Introduction to Nursing Practice ★6 (fi 12) (either term, 0-14c-0). This course introduces students to nursing practice. Practice focuses on individuals in community and long-term care (or those awaiting placement for long term care) settings.

Prerequisites: NURS 114, 116 and 113.
Corequisite: NURS 206.

COURSE HOURS

Lecture: 0  Seminar: 0  Clinical/Lab: 182

COURSE DESCRIPTION

The goal of this course is to introduce the student to nursing practice. The emphasis is on practice with individuals in the community as well as in a continuing care (long-term care) setting /assisted living. This practicum takes place with individuals in diverse circumstances.

INSTRUCTOR INFORMATION

Group A
Tristan Schindlbeck BScN, RN
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BKin, RN
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Instructors are available for student consultation in their office. Please contact your Instructor or the Nursing Office (780-791-4889) to arrange a specific time.
LEVELS OF INDEPENDENCE

(Based on the anticipated competencies of a second-year nursing student)

Levels of independence:

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: The instructor tells the student what to do, about what steps to take.

Information: The instructor tells the student specifics about a concept or topic.

Clarification: The instructor, 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: The instructor 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: Instructor provides positive feedback for correct information and direction provided by the student.

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

Occasional: Indicates that input is provided by instructor now and then.

LEARNING OUTCOMES

Overarching statements:
Students are responsible to familiarize themselves with Graduate Competencies and Year Outcomes (with Cross Reference to courses) 2015-2016. Attention must be given to the competencies that are identified as being relevant to NURS 207.

Students must regularly refer to the document entitled NEPAB’s Condensed Version of CARNA’s Entry-to-Practice Competencies for the Registered Nurses Profession (2013).

All students must practice in a manner that is consistent with:
- CARNa Entry-to-Practice Competencies for the Registered Nurses Profession (2013)
- CARNa Practice Standards for Regulated Members (2013)
It is an expectation that students bring forward competencies acquired in previous courses and that students provide safe, knowledgeable, ethical nursing care. Students who do not meet this expectation are at risk of failing N207 prior to the end of the course.

In addition to maintaining competency with previous course learning outcomes, upon completion of Nursing 207, the nursing student will be able to:

1. Demonstrate, with minimal assistance, the ability to practice according to the competencies listed for second year, described in the following document: Graduate Competencies and Year End Outcomes Collaborative BScN Condensed Version.

2. Demonstrate, with minimal assistance, the processes of self-directed learning, critical thinking, and group work employed in inquiry learning and at the practicum sites.

3. Demonstrate, with minimal assistance, the ability to use professional and therapeutic communication to collaborate with clients of all ages.

4. Demonstrate, with minimal assistance, the ability to use professional communication with colleagues, professionals, and other individuals in the clinical setting.

5. Demonstrate, with minimal assistance, the ability to establish therapeutic relationships with clients.

6. Demonstrate, with minimal assistance, the ability to engage clients of all ages in health promotion activities throughout the lifespan.

7. Demonstrate, with minimal assistance, the ability to perform assessments with individuals of all ages in the context of families.

8. Demonstrate, with assistance, the ability to engage in inquiry based practice.

9. Demonstrate the ability to integrate knowledge and skills in a clinical setting.

10. Demonstrate, with minimal assistance, the ability to provide basic care in a safe and competent fashion (hygiene, ADLs, feeding, bed-making, vital signs, medication administration, mobility, transfer and positioning).

11. Demonstrate, with minimal assistance, client education according to the principles of teaching and learning for health promotion.

12. Demonstrate a beginning knowledge of health challenges and care of individuals, families and groups in minority situations.

13. Demonstrate knowledge and understanding of the concepts of cultural competence and cultural safety.
NURSING PROGRAM POLICIES

Please refer to University of Alberta Collaborative Baccalaureate Nursing Program: Keyano College Student Handbook (2015-2016) for specific Nursing Program policies and to Keyano College Calendar for general College policies.

Please review the Keyano College Nursing Program Policy on Clinical Attire, which is outlined in the student handbook. The following are required items for clinical: nametag, Keyano College ID, watch with second hand, penlight, black pen, bandage scissors and stethoscope.

Please review the Statement on Plagiarism found in Appendix F.

LATE POLICY FOR ASSIGNMENTS

All assignments are to be submitted as indicated in the syllabus and timetable. Extensions on assignments may be granted; however, must be negotiated with the Instructor prior to the due date and with a date specified for late submissions. Assignments not submitted on the day and time specified will incur a 5% deduction per day including weekends. This will be applied each day until the assignment is received by the instructor. Students can submit assignments by e-mail on weekends, but must provide a paper copy on the first day following the weekend.

SPECIALIZED SUPPORTS & DUTY TO ACCOMMODATE

DISABILITY SUPPORT SERVICES: LEARNER ASSISTANCE PROGRAM

If you have a documented disability or you think that you would benefit from some assistance from a Disabilities Counselor, please call or visit the Disability Supports Office 780-792-5608 to book an appointment (across from the library). Services and accommodations are intended to assist you in your program of study, while maintaining the academic standards of Keyano College. We can be of assistance to you in disclosing your disability to your Instructor, providing accommodations, and supporting your overall success at Keyano College.

SPECIALIZED SUPPORTS AND DUTY TO ACCOMMODATE

Specialized Support and Duty to Accommodate are aligned with the office of Disability Support Services: Learner Assistance Program (LAP) guided by federal and provincial human rights legislation and defined by a number of Keyano College policies. Keyano College is obligated by legislation to provide disability-related accommodations to students with identified disabilities to the point of undue hardship.
OVERVIEW OF LEARNING EXPERIENCES

ORIENTATION

It is essential that the students attend orientation on January 11, 2017. Students are responsible for knowing the orientation schedule. Time and location are on the course timetable.

CLINICAL PRACTICE

In order to pass Nursing 207, students must demonstrate safe, knowledgeable, ethical nursing practice, professional behavior, and complete the specified learning experiences.

Components of this clinical experience will include:

- Labs as outlined under the ‘Lab’ section.

- A scheduled nursing practice experience in the clinical setting. All 207 students will rotate through Rotary House/Adult Day Program, Continuing Care, and Medicine.
  
  - Rotary House/Adult Day Program – The focus of this experience will be communication, health teaching, and health promotion and disease prevention.
  - Continuing Care – The focus of this experience will be basic nursing care, including bathing, mobility, feeding, etc.
  - Medicine – The focus of this experience will be health assessment and medication administration.

- Clinical rotations will commence on week two. Clinical rotations may include eight and 12 hour day shifts each week and client research will take place on the day prior to the scheduled shift (except at Rotary House and the Adult Day Program). Please see timetable for dates and times.

  1. Client review will prepare the student to provide safe, knowledgeable, ethical care and is essential to successful completion of this course.

  2. Complete client review on assigned client(s) to include a detailed plan of care consisting of nursing diagnosis, goals, interventions and rationale for intervention. If caring for a client for more than one day, update client information/assessment and nursing care plan on each successive day with the client. Plan of Care for clients are to be submitted to the Instructor for review following pre-conferences.

  3. Perform initial and ongoing assessments on all assigned clients.

  4. Document client care in a draft form for review by the Instructor prior to documenting in the client’s chart.
If a student is absent from the clinical setting due to illness the following must occur:

- The student will contact their assigned unit;
- The student will contact The Nursing Office at 791-4889 and leave a message;
- The individual Instructor will advise students on Instructor contact preference;
- The Instructor may advise the student to contact the Keyano College Nurse at 791-4808.

Students not following these requirements will be considered absent without leave and abandoning their patients. This may result in clinical failure.

If the student is absent from the clinical setting for other reasons:

- The student will contact their assigned unit;
- The student will contact the Nursing Office at 791-4889 and leave a message;
- The individual Instructor will advise students on Instructor contact preference.

**LABS**

It is the expectation that the knowledge and skills obtained from the Nursing 206 and 207 Fixed Resources and Labs will be incorporated into your Nursing 207 clinical rotation. It is an expectation that you read all the required material in preparation for the labs. Preparation ensures more time to practice the skill portion of the lab. Please see timetable for dates and times.

The following labs will be covered as part of 207:

- Medication Administration and Calculation Theory Review and Practice lab.

**OVERVIEW OF COURSE EVALUATION**

In order to pass Nursing 207, students must demonstrate safe, knowledgeable, ethical nursing practice, professional behavior, and complete the specified learning experiences and assignments.

*Students must receive a grade of 60% to pass N207. As well, students must receive a Satisfactory rating in each of the 10 categories on the ENP (see Appendix D for more detail).*

Unsuccessful performance in a clinical course will result in a grade of F regardless of withdrawal date.
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<td>Dates due may vary depending on Group (see Timetable for due date)</td>
<td>15%</td>
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<tr>
<td>Care Plan Assignment</td>
<td>Dates due may vary depending on Group (see Timetable for due date)</td>
<td>15%</td>
</tr>
<tr>
<td>Evaluation of Nursing Practice</td>
<td>Dates due may vary depending on Group (see Timetable for due date)</td>
<td>70%</td>
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<tr>
<td>TOTAL</td>
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<td>100%</td>
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**MEDICATION ADMINISTRATION SAFETY SCREEN (MASS)**

Students are expected to read Chapters 7 & 13 from the following text:


Complete Proficiency Tests from Chapter 7 & 13. In addition, please review chapters 1 through 6, and 12 & 13 in preparation for MASS exam.

The MASS Exam is scheduled to be written on **January 11, 2017 from 0900 to 0945 hours**. Students may use a basic calculator in the exam. The pass mark is 90%. Refer to course timetable for location. Any required changes in time/room number will be communicated on Moodle.

This examination will provide an opportunity for students to demonstrate proficiency in calculating accurate medication dosage. The exam content will include medication preparation, administration protocols, and dosage calculations appropriate to the course, including calculations required to administer oral, and intradermal, subcutaneous, and intramuscular medications.

Medication administration in clinical practice will not commence until successful completion of the supplemental MASS exam.
Students who are unsuccessful will be given the opportunity to write one supplemental exam, which must be completed within one week. If necessary, the student and the Instructor will schedule the MASS re-write in the Skill Centre at a mutually agreed time within a minimum of one day and a maximum of one week.

Students who are unsuccessful in the supplemental exam will be required to withdraw from Nursing 207.

**HEALTH PROMOTION TEACHING PRESENTATION**

For the purposes of this presentation students will work in groups (two to three students per group). The group presentation focuses on the assessment of Population at Rotary House and will consist of:

**Presentation to Rotary House Population**

The primary goal of the group presentation is to develop and deliver a health promotion teaching presentation to the Population at Rotary House. More specifically, students are expected to assess the population and identify a topic appropriate to the needs of that population (must be discussed with both the Instructor and Agency). Each group will then plan a health promotion/activity to present and deliver to this population and the Instructor. A variety of presentation methods can be used (e.g., poster, handouts, brochures, demonstration or a combination). This presentation should incorporate the principles of Primary Health Care and include the integration of nursing research-based literature.

The following is recommended reading in preparation for this presentation:


Students will complete and deliver their presentation during their rotation at Rotary House. The time and date for this presentation will be determined in collaboration with the Instructor and Agency. Please prepare a list of references following APA format used for this presentation and submit to the Instructor on the day of the presentation.

**Appendix C** will be used, by the Instructor, for evaluation of the presentation. This presentation is a group presentation and all group members will receive the same mark. The marking guide includes pertinent information to review prior to commencing this assignment.
CARE PLAN ASSIGNMENT

Instructions

The Case Study for this assignment is Appendix A.

This assignment provides you with the opportunity to:
- Utilize the nursing process, and
- Develop a care plan for a client.

The assignment must be typed (word processed) using the forms provided and following APA format for references. The forms are available electronically on Moodle. Refer to the marking guide (Appendix B). Please submit a copy of the Marking Guide with your assignment.

Note: No abstract is required for this assignment. References may include your textbook, journal articles, or reputable websites.

Client Assessment
Read the case study on Mr. Jones. Complete a nursing assessment. Use the “Client Research Record” form to organize your data.
The following elements should be included in your client assessment:
- Organize the assessment data from the case study according to five variables (physiological, socio-cultural, psychological, spiritual, and developmental).
- Indicate if the data collected is subjective (S) or objective (O).

Nursing Care Plan
Use the “Nursing Care Plan” form to complete your care plan. The following elements should be included in your care plan.

Nursing Diagnosis and Planning
- Write three nursing diagnoses (actual/potential problems) from two different variables. Prioritize your nursing diagnoses in order of most important to least important and provide rationale.
- Write one client goal/expected outcome for each nursing diagnosis. The client goal must be measurable and include a specific time frame.

Implementation of Nursing Interventions
- Write two nursing interventions for each client goal/expected outcome. For each nursing intervention, include the level of prevention (primary, secondary, or tertiary).
- Provide evidence from the literature to support your rationale for each nursing interventions in the column titled “Evidence from the Literature.”

Nursing Evaluation
- Write evaluation criteria for each nursing intervention that would be used to determine if the client achieved each client goal/expected outcome.
Students’ practice performance will be evaluated according to the criteria outlined in the Evaluation of Nursing Practice (ENP) (Appendix D).

- This will be accomplished through observation, assessment, and evaluation of the student during nursing practice. Evaluations will be completed by the Instructor and may be supplemented with input from peers, staff, clients, and other nursing Instructors.
- Additionally, preparation, and safe clinical knowledge will be assessed through nursing plan of care, as well as through the application of the nursing process (nursing diagnosis, goals, interventions, and evaluation of client care).
- Students are expected to be prepared for each clinical day by reviewing procedures, medical conditions, medications prior to providing client care. 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, goals, interventions, medications, client teaching plan) with the Instructor during pre-conference and during clinical time.

If a student is not adequately prepared for clinical to deliver safe, knowledgeable and ethical care to assigned client(s), the Instructor may request that the student leave the unit. Being adequately prepared also includes having a plan of care that encompasses the delivery of safe care to assigned client(s).

Students are expected to pass all 10 components of the ENP in order to pass the course. If you do not pass all criteria on the ENP, it constitutes a clinical failure, as the student has then shown unsafe, unprofessional or unethical nursing practice.

Students who demonstrate unsatisfactory clinical performance, indicative of clinical failure, will be informed immediately by the Instructor. To facilitate progress for the student with unsatisfactory performance, a remedial plan will be developed by the Instructor with input by the student within 24 hours after being advised of unsatisfactory performance. Students who do not meet the required learning outcomes will receive a failing course grade.

The evaluation of students in clinical courses will be achieved through the use of the following three elements:

- Evaluation of Nursing Practice (ENP)
- Grade Descriptors
- Levels of Independence

Weekly clinical reflection will occur at the end of each week of clinical experience. The student may email their instructor the reflection no later than 1600 hours on the day following their last clinical day of the week.
Critical Self Reflection

Identifying critical incidents as a student in nursing education facilitates the integration of theory and practice and can assist the student to foster reflective practice, along with personal and professional development. Instructors will evaluate how students have shown reflective practice by asking questions during pre-conferences, throughout the clinical shifts, during post-conferences, and during midterm and final evaluations.

Students are highly encouraged to critically reflect on their nursing practice throughout the course. Confidentiality MUST be maintained when describing a clinical incident.

Recommended guidelines for Critical Self-Reflection (also known as Reflective Journaling):

- Describe in detail a significant experience that you had during your week. Include thoughts, feelings, and perceptions.
- Reflect on the experience. Describe why this experience was important to you, and what factors (assessment, previously learned experiences, values, beliefs, stereotypes or biases) influenced yours/someone’s else’s decisions/actions/feelings.
- Evaluate your strengths and areas needing improvement in this situation. What were the strengths and areas for improvement for the other health care professionals involved? Explain why you think these were areas of strength or areas needing development. How the client/family is ultimately affected?
- Describe your significant learning. How does this impact your nursing practice? Describe what you would do differently/investigate/maintain if a similar incident should occur in the future. Describe what you would teach someone else (e.g., peer) about this incident in order to improve nursing practice.
- Critical self-reflection should include evidence from the literature.

Midterm Evaluations:

The Instructor and student will meet for the midterm evaluations at predetermined times as set up by the Instructor in advance. Students must come prepared with the following:

a. Their strengths and opportunities for improvement documented and be prepared to discuss them. The focus of the midterm evaluation will be reflection on practice and not assessment of grades. No grades will be discussed during midterm evaluations.

b. Critical self-reflection is required weekly. The student is expected to discuss one event that occurred during their clinical experience and follow the Guidelines for Critical Self-Reflection outlined on the previous page.

Being unprepared for mid-term evaluation will be reflected in the ENP.
Final Written Evaluations:

Final evaluations will be scheduled and occur after the last scheduled shift (see Timetable) in the Instructor’s office. Appointment times will be allotted by the Instructor. A final written evaluation using the ENP in Appendix D will be completed by the student and the Instructor.

Students must complete a Self-Evaluation including:

a. Completion of each of the 10 sections of the ENP with one to two examples per section of how the student met specific criteria. At the end of the ENP, the student should write a summary that outlines strategies to improve clinical practice in the next clinical course. Strategies should be based on literature and referenced.

b. Identification of the grade the student believes they should receive for the course. Students must provide rationale related to the grade that is expected.

Students must come prepared with all of the above or will be required to rebook an appointment with the Instructor. See timetable for when final ENP is due.

Please submit to your Instructor, via e-mail or hard copy, the completed ENP on the date specified on the Timetable.

**PLEASE NOTE:** Students are to complete an on-line course evaluation for Nursing 207, which can be accessed through Moodle or the following link: [http://keyano.fluidsurveys.com/s/nursing-student-evaluation/](http://keyano.fluidsurveys.com/s/nursing-student-evaluation/)

Student feedback is important to ensure continued provision of high quality education in the baccalaureate program.

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**CODE OF ETHICS**


College and Association of Registered Nurses of Alberta (CARNA), Entry to Practice Competencies for the Registered Nurses Profession (2013). Refer to Keyano College Student Handbook Nursing Program Policies (2015-2016) or access in the following link: [http://www.nurses.ab.ca/content/dam/carna/pdfs/DocumentList/Standards/RN_EntryPracticeCompetencies_May2013.pdf](http://www.nurses.ab.ca/content/dam/carna/pdfs/DocumentList/Standards/RN_EntryPracticeCompetencies_May2013.pdf)
STUDENT CODE OF CONDUCT

Please refer to the Student Handbook and review the Student Code of Conduct Policy (Policy 110.0), Student Rights Policy (Policy 111.0) and Student Code of Conduct Procedure (110.1). It is expected that you will review and be aware of expectations relative to student rights, responsibilities, and behavior.

REQUIRED TEXTS

All previously required Collaborative BScN Program textbooks will be used during this course, including all books purchased for Year 2.
Appendix A

Case Study for Care Plan Assignment

Mr. Jones is an 86-year-old man suffering from chronic obstructive lung disease (COPD) and rheumatoid arthritis. His wife died four years ago of stomach cancer. Since that time he has found it difficult to care for himself due to his shortness of breath and immobility. For two years prior to his admission to an extended care facility, he was able to live at home with assistance from a home-care agency and his family. He has always been an extremely independent man and he has found it very difficult to rely on his family members, who, in his words, “have their own life to live.” He decided to move into an extended-care facility, but insists, “I will not just vegetate here; I still want a life.”

He was a coal miner and worked underground from the age of 15 until he retired at age 60. He stopped smoking at the age of 50. After quitting, he noticed he was coughing excessively and became short of breath after exercise. He was diagnosed with “black lung,” or pneumoconiosis, shortly after that, but refused to change careers because coal mining was all he knew. His condition has progressed to become moderately severe lung disease. During his career he was very active in the coal miner’s union and became instrumental in forcing the coal industry to pay compensation to coal miners who developed lung disease. When he retired, he stated, “God is watching over me; I was 45 years underground, and only had one injury due to the job.”

On examination, you find a very bright and talkative man, oriented to person, place, and time. He has no short-term memory loss and, given time, can answer all questions. He is interested in current events and he frequently diverts the conversation to the daily news.

He has a ruddy complexion, but the rest of his body is very pale. His skin is very dry and wrinkled. He is 173 cm tall and weighs 60 kg. He states that as a young man he was 183 cm tall. You note that the skin on both legs below the shins is shiny, hard, cold, and bluish in color. Otherwise, his skin is soft and warm to touch. His fingernails are pale and clubbed. His capillary refill time is greater than three seconds. His toenails are very thick and hard. His feet are cold to the touch.

His chest sounds are diminished, with slight crackles auscultated throughout. There is a barely audible expiratory wheeze and he is on continuous oxygen by nasal cannula. His oxygen saturation on two litres of oxygen is 96–97%; heart sounds are normal; pedal pulses cannot be palpated but can be heard with a Doppler; other pulses are strong and regular. Due to his rheumatoid arthritis he is wheelchair bound; he becomes short of breath when transferring to the wheelchair.

His abdomen is concave in shape, and his bowel sounds are active in four quadrants. He has a decreased appetite, which he states is due to the bland food at the facility. He prefers spicy foods. He states his “water intake is poor to decrease the number of times I need to void.” He states he needs suppositories to have a bowel movement. He is wearing an incontinence product due to urinary and fecal incontinence. On questioning, you find that he does have the urge to both void and defecate but does not want to ask someone to transfer him to the toilet because it is too much
of a “bother” to the staff. When he does request assistance, it is often too late, and so he is incontinent. He finds this humiliating. This skin in his perineal area is reddened.

Due to his rheumatoid arthritis, he has contractures of his wrists, hips, and ankles, with limited movement of his elbows, knees, and spine. He does weight bear to transfer and states that he dreads the day “I am so useless I have to be lifted up by that human crane.”

Mr. Jones’ medications include the following:

• Aspirin, extended release – 800 mg q12 hr po for his rheumatoid arthritis.
• Calcium carbonate – 1000 mg po once daily.
• Senekot – ii tabs po at bedtime.
• Ducosate sodium – 200 mg po every morning.
• Dulcolax supp – 10 mg pr PRN.

Mr. Jones is visited frequently by many friends and family, is still active with the coal miner’s union, and participates in their social functions. He is particularly close to and proud of his grandson, a mining engineer, who visits him frequently. His grandson has accepted a job in Yellowknife and will be moving soon. Mr. Jones has joined the residents’ council of the extended-care facility and gets quite frustrated by the lack of interest paid by the other intellectually competent residents.

Mr. Jones does not profess to be a member of any church but states that he is a Christian. He states he is not interested in attending church services except for Easter Sunday and Christmas Eve.
Appendix B

Nursing Care Plan Assignment Marking Guide

Key Content

Client Assessment

Organized assessment data according to five variables:

- Physiological (20 marks)  
  Excellent  Satisfactory  Minimal  None
- Psychological (2 marks)  
  Excellent  Satisfactory  Minimal  None
- Socio-cultural (2 marks)  
  Excellent  Satisfactory  Minimal  None
- Developmental (2 marks)  
  Excellent  Satisfactory  Minimal  None
- Spiritual (2 marks)  
  Excellent  Satisfactory  Minimal  None

Identified data as subjective or objective (2 marks)  
Excellent  Satisfactory  Minimal  None

/30

Comments:

Nursing Diagnoses and Planning

<table>
<thead>
<tr>
<th>Points:</th>
<th>5</th>
<th>3</th>
<th>1</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wrote three nursing diagnoses from at least two different variables</td>
<td>Excellent</td>
<td>Satisfactory</td>
<td>Minimal</td>
<td>None</td>
</tr>
<tr>
<td>Prioritized nursing diagnoses from most important to least important and provide rationale</td>
<td>Excellent</td>
<td>Satisfactory</td>
<td>Minimal</td>
<td>None</td>
</tr>
<tr>
<td>Wrote one goal/expected outcome for each nursing diagnosis that is measurable and includes a specific time frame (SMART Goal)</td>
<td>Excellent</td>
<td>Satisfactory</td>
<td>Minimal</td>
<td>None</td>
</tr>
</tbody>
</table>

/15

Comments:
### Key Content

<table>
<thead>
<tr>
<th>Points:</th>
<th>5</th>
<th>3</th>
<th>1</th>
<th>0</th>
</tr>
</thead>
</table>

#### Implementation of Nursing Interventions

- **Wrote two nursing interventions for each goal/expected outcome**
  - Excellent
  - Satisfactory
  - Minimal
  - None

- **Indicated level of prevention for each nursing intervention**
  - Excellent
  - Satisfactory
  - Minimal
  - None

- **Using more than one source provide evidence from the nursing literature to support rationale for nursing interventions**
  - Excellent
  - Satisfactory
  - Minimal
  - None

/15

#### Nursing Evaluation

- **Wrote evaluation criteria for each goal/expected outcome**
  - Excellent
  - Satisfactory
  - Minimal
  - None

/5

#### Format:

- **Correctly formatted the assignment, following APA formatting (e.g., title page, reference page, grammar, and in text citations).**
  - Excellent
  - Satisfactory
  - Minimal
  - None

/5

**Total**

/70

#### Legend:

- **5** – Excellent work, comprehensive information or analysis included, great attention to detail throughout
- **4** – Satisfactory work, most required information included at an adequate level
- **3** – Satisfactory work, most required information included at an adequate level
- **2** – Minimal required information included, incomplete work
- **1** – Minimal required information included, incomplete work
- **0** – Required information not identifiable
Appendix C

Instructor Evaluation: Health Promotion Presentation Marking Guide

Instructor’s Name:

Students’ Names:

Content
○ Overview of the presentation – Explicit Introduction
○ Overview of the population – Identifying/Demographic Data
○ Assessment of community agency population - health determinants, strengths and risks
○ Succinctly covers the assigned topic and is appropriate for the assigned community population.
○ Use of the nursing process is evident in the poster.
○ Content is appropriately referenced according to APA Format
○ Incorporation of the principles of Primary Health Care
○ Integration of nursing research-based literature
○ Summary of Key points

Comments: /5

Presentation Medium
○ Attractive, creative, vivid visual image, legible
○ Variety of formats (prose, lists, charts, tables, graphs, pictures)
○ Age & Agency appropriate
○ Appropriate text font

Comments: /5

Presentation Style
○ Avoids reading notes – use notes only as a guide
○ Connects with audience
○ Eye contact with audience – scan audience with eyes
○ Pace
○ Nonverbal communication- speak in concert with your hands
○ Tone and projection of voice – interesting voice
○ Enthusiasm
Comments: /5

Organization
- Time frames
- Presentation contains a clearly defined introduction, body, and conclusion with natural transitions between segments
- Presentation flows logically and smoothly
- Group members share in presentation delivery
- Group members demonstrate support to each other
- Summary
- Question and Answer Component

Comments: /5

Strategies
- Strategies maintain interest
- Appropriate creativity
- Appropriate use of humor
- Application of the domains of learning
- Appropriate use of self

Comments: /5

Resources
- Appropriate and effective

Comments: /5

Legend:

5 – Excellent work, comprehensive information or analysis included, great attention to detail throughout

1 – Minimal required information included, incomplete work

3 – Satisfactory work, most required information included at an adequate level

0 – Required information not identifiable

Total: /30

*This presentation is a group presentation and all group members will receive the same mark.
Appendix D

Nursing 207 Evaluation of Nursing Practice – 2016-2017

Student: ____________
ID: ____________
Clinical Faculty: ____________
Section #: ____________

Placement: _________
Health Centre _________
Posting Dates: _________
From: _________ To: _________

Days Absent/Sick: _________
Provided student with copy of evaluation: Yes ☐ No ☐

Final mark: _________ /40

*Student’s overall performance will be assessed in each of the categories from Graduate Competencies and Year-End Outcomes Condensed Version 2015-2016

**PASS**

Excellent (4): Student meets the objectives at a “Level of Independence” greater than identified on the ENP, all of the time.

Very Good (3.5): Student meets the objectives at a “Level of Independence” greater than identified on the ENP, majority of the time.

Good (3.0): Student meets the objectives at a “Level of Independence” greater than identified on the ENP some of the time.

Satisfactory (2.5): Student meets the objectives at a “Level of Independence” required on the ENP.

**FAIL**

Unsatisfactory (<2.5): Student fails to meets the objectives at a “Level of Independence” required on the ENP.

Note:

- Refer to the Graduate Competencies and Year-End Outcomes Condensed Version 2015-2016. All courses contribute to the acquisition of each competence. All students are responsible for integrating all knowledge and skills covered in previous and concurrent coursework.

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

LEVEL OF INDEPENDENCE (There is an expected progression within a course and between levels).

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

<table>
<thead>
<tr>
<th>Levels</th>
<th>Levels of independence (beginning of term → end of term)</th>
<th>Description (beginning of term → end of term)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1, junior 1</td>
<td>With assistance → with minimal assistance</td>
<td>The student requires direction and information → The student requires occasional direction and information.</td>
</tr>
</tbody>
</table>

Definition of terms:

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

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

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

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

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

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

Student is to complete ENP and submit to faculty as outlined in timetable prior to final evaluation. One to two examples required for each main section.

Facility documentation with specific examples are required if faculty disagrees.

RELATED COURSE OBJECTIVE:
Demonstrate the ability to practice in accordance with NURS 207 competencies as described in the document entitled: Graduate Competencies and Year-End Outcomes Condensed Version 2015-2016.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.3.1</td>
<td>Independently represents self by first and last name and professional designation (protected title) to clients and the health care team.</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
</tr>
<tr>
<td>1.1</td>
<td>(Professional Qualities and Attributes) Demonstrates attributes of: accountability and responsibility, beginning confidence and self-awareness, a professional presence, initiative, collaboration with the care team and significance of professional activities.</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
</tr>
</tbody>
</table>
### 2. KNOWLEDGE-BASED PRACTICE

**A. Specialized Body of Knowledge**

Has knowledge from nursing and other sciences, humanities, research, ethics, spirituality, relational practice, and critical inquiry.

<table>
<thead>
<tr>
<th>RC</th>
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<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

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### Faculty’s comments

MT: ______

F: ______

---
<table>
<thead>
<tr>
<th>Levels of independence (beginning of term → end of term): With assistance → with minimal assistance</th>
<th>MT</th>
<th>F</th>
<th>MT</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1 ➢ Demonstrates knowledge in current and emerging health care issues and challenges, including relevant related knowledge of: workplace health and safety, community development and population health, global and community health and safety, primary care, determinants of health, health disparities and inequities and population health.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>6.1 ➢ Demonstrates knowledge in current population and health care research, nursing and health informatics and information communication technology.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>7.1 ➢ Develops an increasing knowledge about human growth and development of persons, groups, communities and populations.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>8.1 ➢ Demonstrates knowledge in health sciences: physiology, pathology, pharmacology, epidemiology, genetics, immunology.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>9.1 ➢ Demonstrates knowledge in nursing science, social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care and the contribution of registered</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
10.1 ➢ Accesses, critiques and uses research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice.

<table>
<thead>
<tr>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Faculty’s comments

MT: _____
F: _____

3. **KNOWLEDGE - BASED PRACTICE**

**B. Competent Application of Knowledge**

Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas about the provision of nursing care (Ongoing comprehensive assessment; health care planning; providing nursing care, and; evaluation). The provision of nursing care is an iterative process of critical inquiry and is not linear in nature.

1: Ongoing Comprehensive Assessment - Incorporates critical inquiry and relational practice to conduct a comprehensive client-focused assessment that emphasizes client input and the determinants of health.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.1</td>
<td>(Client engagement) Reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting.</td>
<td>□ Yes □ Yes □ Yes □ Yes</td>
<td>□ Yes □ Yes</td>
<td>_____</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ No □ No □ No □ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.1</td>
<td>(Critical Thinking) Uses anticipatory planning, analyzes and interprets data and collaborates with the health team during ongoing assessment of the client's actual and potential health status and identification of their needs, capacities and goals.</td>
<td>□ Yes □ Yes □ Yes □ Yes</td>
<td>□ Yes □ Yes</td>
<td>_____</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ No □ No □ No □ No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13.1 ➢ (Tools and techniques) Uses appropriate, comprehensive assessment tools and information and communication technologies to assess clients and support information synthesis, complying with evidence-informed practice, agency policies and protocols and completing assessments in a timely manner.

<table>
<thead>
<tr>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Faculty’s comments

MT: 

F: 

4. **KNOWLEDGE-BASED PRACTICE**

**B. Competent Application of Knowledge**

Area 2: Health care planning: within the context of critical inquiry and relational practice, plans nursing care appropriate for clients which integrates knowledge from nursing, health sciences and other related disciplines, as well as knowledge from practice experiences, clients’ knowledge and preferences, and factors within the health care setting.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>14.1</td>
<td>(Client Engagement) Minimizes positional power and promotes client ownership by involving clients in identifying and outcomes of care, exploring care alternatives and accessing appropriate resources.</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>15.1</th>
<th>(Anticipatory planning skills) Uses critical inquiry and principles of primary health care to initiate appropriate planning for clients’ anticipated health problems, client</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>
and staff safety concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems.

**Faculty’s comments**

MT: 
F: 

### 5. KNOWLEDGE-BASED PRACTICE

**Area 3: Providing Registered Nursing Care: provides client-centered care in situations related to:**

- health promotion, prevention and population health;
- maternal/child health;
- altered health status including acute and chronic physical and mental health conditions and rehabilitative care;
- palliative care and end-of-life care.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>16.1</td>
<td>(Safety) Performs effectively in rapidly changing client condition; Applies bio-hazard and safety principles to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>17.1</td>
<td>(Prevention) Incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others.</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18.1</td>
<td>(Evidence-Informed Care) Incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>19.1</td>
<td>(Supportive client-centered care) Provides culturally safe, competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

| 20.1 | (Organization, skill and clinical judgment) Recognizes, seeks help and assist in rapidly changing, unstable client situations. | Yes | Yes | Yes | Yes | No | Yes |

| 21.1 | (Organization, skill and clinical judgment) Prioritizes and provides timely care and consult as necessary in complex and rapidly changing client situation. | Yes | Yes | Yes | Yes | No | Yes |

| 22.1 | (Organization, skill and clinical judgment) Provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes. | Yes | Yes | Yes | Yes | No | Yes |

**Faculty’s comments**

MT:

F:

---

**6. KNOWLEDGE-BASED PRACTICE**

**B: Competent Application of Knowledge**

Area 4: Evaluation of client care: Monitors the effectiveness of client care to inform future care planning.
<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>/4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Levels of independence (beginning of term ⇒ end of term): With assistance ⇒ with minimal assistance</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
</tr>
<tr>
<td>23.1</td>
<td>(Evaluation) In consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required.</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
<tr>
<td>24.1</td>
<td>(Documentation) Provides concise, accurate, timely reports and documentation of care.</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
<tr>
<td></td>
<td>Faculty’s comments</td>
<td>MT:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. ETHICAL PRACTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates competence in professional judgment and practice decisions guided by the values and ethical responsibilities in the CNA Code of Ethics for Registered Nurses (2008), and the CARNA document Ethical Decision-making for Registered Nurses in Alberta: Guidelines and Recommendations (2010). Engages in a critical inquiry to inform clinical decision-making and establishes therapeutic, caring, and culturally safe relationships with clients and health-care team.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>/4</th>
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<tbody>
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<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
</tr>
<tr>
<td>25.1</td>
<td>(Ethical competence) Promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning.</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
</tbody>
</table>
### 26.

**➢ (Knowledgeable ethical practice)**

Practices according to the CNA Code of Ethics including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical responsibilities and legal obligations, informed consent, client autonomy, advocacy privacy, confidentiality and security.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

**Faculty’s comments**

MT: 

F: 

### 8. SERVICE TO PUBLIC

Demonstrate an understanding of the concept of public protection and the duty to provide nursing care in the best interests of the public.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Levels of independence (beginning of term → end of term): With assistance → with minimal assistance</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
</tr>
</tbody>
</table>

| 27. 1 | ➢ (Team Work) Demonstrates leadership in coordination of health care, promotion of interprofessional collaboration, team communication and development, including knowledge of the scope of practice of members and the appropriate assignment, delegation and supervision of work within the team to facilitate continuity of care. |   |   |   |   |

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

### 28. 1

**➢ (Knowledge of systems and change)**

Uses knowledge of all levels of the health care system to: assess and improve organizational culture.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
enhance the quality of professional and safe practice environment, use established policies and protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change.

| 29. 1 | (Knowledge of systems and change) Supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness. | Yes | Yes | Yes | Yes | —— |

| 30. 1 | (Workplace health and safety) Applies principles of workplace health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages resources. | Yes | Yes | Yes | Yes | —— |

**Faculty's comments**
MT: 
F: 

**9. SELF-REGULATION**
Demonstrates an understanding of professional self-regulation by developing and enhancing own competence, ensuring consistently safe practice, and ensuring and maintaining own fitness to practice.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student's examples</th>
<th>Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levels of independence (beginning of term → end of term). With assistance → with minimal assistance</td>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
<td>4</td>
</tr>
<tr>
<td>31. 1</td>
<td>(Self-Regulation) Understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>32. 1</td>
<td>(Self-regulation) Assumes individual responsibilities for all aspects of</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
10. **INQUIRY LEARNING**
Demonstrate competency with the application of the elements of inquiry learning in theory, laboratory and clinical experiences.

<table>
<thead>
<tr>
<th>RC</th>
<th>Objective</th>
<th>Student Objectives Met (Yes/No)</th>
<th>Faculty Assessment (Yes/No)</th>
<th>Student’s examples</th>
<th>Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>MT</td>
<td>F</td>
<td>MT</td>
<td>F</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Levels of independence (beginning of term ➔ end of term): With assistance ➔ with minimal assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. 1</td>
<td>➢ Demonstrates competency with the application of the elements of inquiry learning in class, laboratory and clinical experiences.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>34. 1</td>
<td>➢ Demonstrates the ability to deal with ambiguity and diversity.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>35. 1</td>
<td>➢ Demonstrates understanding of mentorship in professional practice</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>36. 1</td>
<td>➢ Demonstrates understanding of content through scholarly writing.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Faculty’s comments**
MT: ____
F: ____
Midterm further comments/recommendations for growth:

Student’s comments and recommendations:

———

Faculty’s comments and recommendations:

———

Student (PRINT NAME): ______

Student (SIGNATURE): ___________________________ Date: ______

Clinical Faculty (PRINT NAME): ______

Clinical Faculty (SIGNATURE): ___________________________ Date: ______
## Final recommendations to support student development in further clinical courses (specific to the student's clinical practice):

**Student Recommendations:**


**Faculty’s recommendations:**


*Student is to share and discuss these recommendations with their next clinical faculty.*

**Student (PRINT NAME):**

**Student (SIGNATURE):**  
Date: 

*Please Note: Student signature on this document denotes that the student has read the evaluation. It does not mean that the student necessarily agrees with all of its content.*

**Clinical Faculty (PRINT NAME):**

**Clinical Faculty (SIGNATURE):**  
Date: 

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

Keyano College Percentage – Alpha Grading System

<table>
<thead>
<tr>
<th>Descriptor</th>
<th>Percentage Scale</th>
<th>Alpha Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Excellent</strong></td>
<td>96-100</td>
<td>A+</td>
</tr>
<tr>
<td></td>
<td>90-95</td>
<td>A</td>
</tr>
<tr>
<td></td>
<td>85-89</td>
<td>A-</td>
</tr>
<tr>
<td><strong>Good</strong></td>
<td>80-84</td>
<td>B+</td>
</tr>
<tr>
<td></td>
<td>76-79</td>
<td>B</td>
</tr>
<tr>
<td></td>
<td>72-75</td>
<td>B-</td>
</tr>
<tr>
<td><strong>Satisfactory</strong></td>
<td>68-71</td>
<td>C+</td>
</tr>
<tr>
<td></td>
<td>64-67</td>
<td>C</td>
</tr>
<tr>
<td>Minimum Pass</td>
<td>60-63</td>
<td>C-</td>
</tr>
<tr>
<td><strong>Poor</strong></td>
<td>55-59</td>
<td>D+</td>
</tr>
<tr>
<td></td>
<td>50-54</td>
<td>D</td>
</tr>
<tr>
<td><strong>Failure</strong></td>
<td>0-49</td>
<td>F</td>
</tr>
</tbody>
</table>
Appendix F

Statement on Plagiarism

All students must complete the Plagiarism/Tutorial Certificate found on Moodle. To locate this information, sign into Moodle and on the left side of the page under student the tutorial can be located.

Expectations:

1. Beginning in January 2016, all students must complete this tutorial. The certificate must be shown to the instructor prior to submitting any written assignment. Failure to show the instructor the certificate of completion could result in a late written assignment penalty.

2. If you have completed this tutorial in a University Studies course you can show your instructor the certificate. The tutorial is required to be completed only once during your time at Keyano unless you have left the program and returned.

Beginning in September 2016 all new students must complete the plagiarism tutorial