



UNIVERSITY OF ALBERTA
COLLABORATIVE BACCALAUREATE
NURSING PROGRAM
KEYANO COLLEGE



NURSING 295
NURSING PRACTICE IV

Winter 2013
(January 7th-February 22nd, 2013)

Tutors:	Group A	Candi Muise	BScN RN MN
	Group B	Nadine Rimmer	BScN RN MN

Revised November 2012

Nursing 295: Nursing Practice IV Course Outline

CALENDAR STATEMENT:

NURS 295 Nursing Practice IV *7 (fi 14) (either term, 0-3s-28c in 8 weeks;0-1.5s-15c).
Practice focuses on restoration, rehabilitation and support (including health promotion and disease prevention) of clients with chronic and less acute variances in health across the life span. Practice occurs in homes or in community-based settings.

Prerequisites: NURS 117, 118, 190, 191, 194, 195 and MMID 133. Pre- requisite: NURS 290.

COURSE HOURS: LEC: 0 SEM: 21 LAB: 21 CLINICAL: 175

COURSE DESCRIPTION:

This course will provide opportunities for students to continue to participate in health promotion and primary prevention activities while focusing on health across the life-span in child-birth facilities, homes, community health clinics, schools and other community based settings. Integration of the concepts of primary health care, health promotion and disease prevention and determinants of health are examined in the community context.

TUTOR INFORMATION:

Group A: Candi Muise BScN RN MN
Phone (office): 792-5629
Email: candi.muise@keyano.ca

Group B: Nadine Rimmer
Phone (office): 792-5701
Email: nadine.rimmer@keyano.ca

TUTOR AVAILABILITY:

Given that clinical times vary, office hours are available on a weekly basis. Please see your tutor for specific hours of availability.

COURSE OBJECTIVES:

LEVELS OF INDEPENDENCE

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

With assistance: The student requires direction and information.

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

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

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

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

Direction: clinical tutor tells student what to do, about steps to take

Information: clinical tutor tells student specifics about a concept, topic

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

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

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

Consultation: student provides clinical tutor 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 clinical tutor now and then

In addition to maintaining competency with previous course objectives, upon completion of Nursing 295, the nursing student will be able to:

Objectives

Overarching statements:

Students are responsible to familiarize themselves with *Graduate Competencies and Year Outcomes (with Cross Reference to courses) 2012-2013*. Attention must be given to the competencies that are identified as being relevant to NURS 295.

Students must regularly refer to the document entitled *Graduate Competencies and Year-End Outcomes Condensed Version 2012-2013*. Attention must be given to the Year 2 Column. This document serves as the basis for the evaluation of students' clinical practice.

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

- CARNA Nursing Practice Standards (2003) and all other CARNA standards
 - The CNA Code of Ethics for Registered Nurses (2008).
1. Demonstrate, with assistance, the processes of self-directed learning, critical thinking, and group process in utilizing context-based learning, in all learning activities.
 2. Demonstrate, with minimal assistance, the ability to practice in accordance with Year 2 competencies, as described in the document entitled: *Graduate Competencies and Year-End Outcomes Condensed Version 2012-2013*.
 3. Demonstrate, with minimal assistance, the ability to use professional and therapeutic communication skills to collaborate with healthy clients, clients experiencing chronic or less acute variances in health across the life span in community based setting, homes, and some acute care centres.
 4. Demonstrate, with minimal assistance, the ability to manage restoration, rehabilitation, and support activities for clients experiencing chronic or less acute variances in health.
 5. Demonstrate, with minimal assistance, the ability to manage health promotion and primary prevention activities using advanced therapeutic/interpersonal communication skills, health counseling skills, and teaching and learning principles.
 6. Demonstrate, with minimal assistance the ability to perform intermediate health assessments skills with healthy individuals across the lifespan in the context of family within a community, and demonstrate with assistance the ability to perform basic assessment of the childbearing family.
 7. Demonstrate, with minimal assistance, the ability to engage in evidence-based practice.
 8. Demonstrate the ability to integrate knowledge into clinical practice.

NURSING PROGRAM POLICIES

NURSING PROGRAM POLICIES

Please refer to the University of Alberta Collaborative Baccalaureate Nursing Program Keyano College Student Handbook 2012-2013 for specific Nursing Program Policies and to Keyano College Credit Calendar for general college policies and Student Rights, Responsibilities, Misconduct, Discipline, and the Student Appeal Process.

Please see **APPENDIX A** for Student's Rights, Responsibilities, Student Misconduct and Discipline and Appeal Process document.

Withdrawal Dates for Classes:

Please refer to Keyano College Credit Calendar for the policy statement on withdrawal date.

Examinations:

Please consult the Keyano College Credit Calendar for the policy statement on examinations.

Please note that examinations begin and end at the scheduled time. Students who arrive late will not be allowed to write the examination if students have already completed the examination and have left the room. Students will not be allowed to leave the classroom during the writing of exams without the permission of the tutor. Students are allowed to leave all jackets, purses, books, bags, eyeglass cases, pencil cases or similar items in their lockers. Any of these items brought to the examination are to be left at the front of the classroom. Students are not allowed to have food or drink in the classroom during exams.

NAME TAG IDENTIFICATION

BScN Nursing Students are required to have a name tag that distinguishes the year of study. Name tags may be purchased from Cindy Critch in the Nursing Department Office. Each second year name tag will have the Keyano Logo, the student's first name, BScN Nursing Student, and Second Year. The second year name tags are white background with red printing. Name tags are to be visible and worn on upper chest area only.

ABSENTEEISM:

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 if and how they wish to be contacted, including the number; and
- 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; and
- The individual instructor will advise students if and how they wish to be contacted, including the number.

DISABILITIES:

Specialized Supports and 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 Counsellor, 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.

REQUIRED LEARNING EXPERIENCES

In order to pass NURS 295, students must demonstrate safe ethical nursing practice, professional behavior, receive a passing mark in Evaluation of Nursing Practice, and complete all assignments. In addition, students are expected to implement previously learned nursing skills from 1st and 2nd year courses previously undertaken.

LABS

See Lab Manual for specific objectives, readings and lab activities. Refer to 295 timetables for lab times and locations.

Newborn Nursing Care Lab

At the completion of this lab, the student will be able to provide nursing care for the newly born patient. The student will gain insight into newborn assessment, including assessment of reflexes, as well as newborn bath principles. Nursing care of infant feeding management will be outlined.

Maternal Assessment Lab

At the completion of this lab, the student will be able to provide nursing care for the postpartum client. The student will gain insight into maternal assessment, including physical and psychosocial assessments.

Post-operative Cesarean Section Lab

At the completion of this lab, the student will be able to provide nursing care for the client recovering from cesarean birth. The student will gain insight into post-operative maternal assessment, including post-operative recovery and post-partum assessments.

Female Catheterization Lab

At the completion of this lab, the student will be able to perform female catheterization.

Documentation Lab

At the completion of this lab, the student will demonstrate an increased knowledge of nursing documentation specific to the maternal-child unit and public health department.

Epidural Lab

At the completion of this lab, the student will be knowledgeable about an epidural analgesic as means for pain control during labour. The student will complete AHS epidural certification. The student will, under direct supervision, be proficient in monitoring an infusion dependent upon certification status.

Review the following Labs from Nursing 291 and Nursing 294

Abdominal Assessment Lab

The focus of this lab is the assessment of the gastrointestinal system, specifically, assessment of the abdomen, including inspection, palpation (light and deep), percussion and auscultation.

Catheterization Lab

Review aseptic techniques of catheterization and general catheterization principles.

Documentation Lab

This lab will assist the student to understand the principles of legal documentation for nurses as well as the purpose and manner of nursing documentation. Charting specifically related to the Northern Lights Regional Health Center will be introduced.

Intravenous Therapy Lab

This lab will assist the student to develop the skills necessary to care for an individual receiving intravenous (IV) therapy, including monitoring an infusion; detecting and managing IV problems and initiation and care of intermittent infusion plugs.

Neurological Assessment Lab

The focus of this lab is the assessment of the neurological system, including cranial nerve testing and reflexes.

CLINICAL – Maternal Child Health & Family Health Service

1. During this course, students will have a continuous experience in community-based practice, in homes and some acute care settings. Students will participate in nursing care of childbearing families, health promotion programs, prevention programs, birthing and postpartum experiences.
2. Participate in site selected labs: se aforementioned labs.
3. Participate in a client experience during antepartum, intrapartum, and/or postpartum periods. If a live birthing experience is not available, a birthing film or simulation will be utilized.
4. Participate in health promotion activities in a public health setting and other community settings as appropriate and organized by instructor.
5. Participate during a Well Child Clinic.
6. Utilize the CFAM/CFIM model and apply to nursing care.
7. Accurately perform an assessment on a newborn and postpartum client.
8. Collaborate with clients, family, nurse, community members and members of other disciplines.
9. Participate in immunization programs.
10. Participate in an interview process with a family about their experience during ante partum intra partum and postpartum phases of childbirth.
11. Participate in a prenatal class if available.
12. Participate during the immediate post-partum home visit through the Healthy Beginnings Program.
13. Participate in community support activities organized by your instructor. The community support activity is a school health promotion/disease prevention presentation.
14. Observe and/or participate in health team meetings.

RECOMMENDED TEXTS & RESOURCES

- American Psychological Association. (2010). *Publication manual of the American psychological association*. (6th ed.). Washington, D.C.
- Arnold, E., & Boggs, K. (2003). *Interpersonal relationships: Professional communication skills for nurses*. (5th ed.). St. Louis, MO: Saunders.
- Chapman, L. & Durham, R. (2010). *Maternal-Newborn Nursing: The Critical Components of Nursing Care*. Philadelphia, PA: F.A. Davis Company
- Charting made incredibly easy* (3rd ed.). (2005). Philadelphia, PA: Lippincott
- Day, R.A., Paul, P., Williams, B., Smeltzer, S.C. & Bare, B. (2007). *Brunner & Suddarth's textbook of medical-surgical nursing* (1st Canadian ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
- Jarvis, C. (2009). *First Canadian edition: Physical examination & health assessment*. Toronto, ON: Saunders.
- LeFever-Kee, J. (2010). *Laboratory and diagnostic tests with nursing implications*(8th ed.). Upper Saddle River, New Jersey: Pearson.
- London, M., Ladewig, P., Ball, J., & Bindler, R. (2007). *Maternal & Child Nursing Care*. (2nd ed.). New Jersey: Prentice Hall.
- Peolhuis-Leth, D.J., & Van Leeuwen, A.M. (2009). *Davis's Comprehensive handbook of laboratory and diagnostic tests with nursing implications* (3rd ed.). Philadelphia, PA: F.A.Davis.
- Potter, P. A., & Perry, A. (2010). *Clinical nursing skills & techniques*. (7th ed.). St Louis, MO: Mosby.

- Potter, P. A., Perry, A. G., Ross-Kerr, J. C., & Wood, M. J. (Eds.). (2006). *Canadian fundamentals of nursing* (3rd ed.). Toronto, ON: Mosby.
- Stephen, T.C., Skillen, D.L., Day, R.A. & Jensen, S. (2012). *Canadian Jensen's nursing health assessment: a best practice approach*. Philadelphia, PA: Wolters Kluwer Health| Lippincott Williams & Wilkins.
- Vallerabd, A.H., Sanoski, C.A. & Deglin, J.H. (2013). *Davis's drug guide for nurses* (13th ed.). Philadelphia, PA: F.A. Davis Company.
- Wright, L., & Leahey, M. (2009). *Nurses and families: A guide to family assessment and intervention* (5th ed.). Philadelphia, PA: F. A. Davis.

COURSE EVALUATION

Marking for all course evaluation methods will be based on the Four Point Alpha Marking System found in **APPENDIX B**.

OVERVIEW OF COURSE EVALUATION

1. Medication Administration Safety Screen (MASS)	<u>Pass/Fail</u>
2. Evaluation of Nursing Practice (ENP)	50%
3. Family Home Visit Follow Through Assignment	25%
Part A Ante Partum	
Part B Intra Partum	
Part C Post Partum	
4. Clinical Exam	25%
Total	100%

PLEASE NOTE:

****In order to pass NURSING 295 course the student must: a) demonstrate safe, knowledgeable, and ethical behaviors expected of a professional in all nursing practice, clinical labs, and home visit experiences; and b) complete and submit all the specified learning experiences and assignment(s).**

Written assignments will be marked utilizing the marking system enclosed in the appendixes. Written assignments are to be **submitted prior to 12 noon** on the stated due date unless prior arrangements have been made with the tutor.

SEMINARS

Please see the timetable regarding seminar times. School teaching presentations will be presented during these sessions and also any topics or concerns related to clinical experience can be discussed.

COURSE EVALUATION DETAILS

1. Medication Administration Safety Screen [MASS] (Pass/Fail)

Date: See timetable

Location: See timetable

This examination will provide an opportunity for students to demonstrate proficiency in calculating accurate medication dosages.

The pass mark for this exam will be **A (90%)**. The use of calculators is acceptable.

*Students will have two opportunities to pass the Medication Administration Safety Screening (MASS) exam at the beginning of each clinical course. Failure to pass the MASS exam at the beginning of a clinical course will require the student to withdraw from the clinical course.

Unsuccessful students will be given the opportunity to write one supplemental exam which must be completed within one week. Students who fail to attain an 'A' mark on the supplemental exam will fail the course and be required to withdraw from the NURSING 295 course.

Re-writes will be scheduled in the Skill Center at a time that is mutually agreed upon by the student and the instructor.

Medication administration in clinical practice will not commence until successful completion of this exam.

2. **Evaluation of Nursing Practice (ENP) (50%)**

This mark will be determined through observation of the student during nursing practice in the clinical setting. Observations will be made by the tutor and may be supplemented with input from peers, clients and staff of the clinical setting. Additionally, preparation and safe clinical knowledge will be assessed through concept mapping, as well as through the application of nursing diagnoses and goal setting for clients receiving nursing care.

A formative, written midterm evaluation will be completed with the tutor at an agreed upon time in the clinical setting. In preparation, the student is expected to write a short summary of their clinical experience to date, including accomplishments and areas for development. A mark will not be assigned.

In addition to this midterm evaluation, the student is expected to prepare weekly reflective writings detailing clinical activities, areas of strength and areas for improvement. This activity commences the first week of clinical, both for acute care and community care settings. This is to be submitted to the tutor no later than Fridays at noon on a weekly basis until the course is completed.

Students are to come to their final evaluation of nursing practice with a detailed self-reflection of how they met the course objectives. This reflection should include examples and evidence from the literature. Ensure your reflection includes how behaviors expected of a professional were demonstrated. Students will be evaluated based on the criteria outlined in **APPENDIX C**. This self-evaluation form must be completed with comments pertaining to the identified areas, as well as an expected mark. Rationale should be provided related to the mark that is expected. The tutor's written evaluation will be added to the student's self-evaluation. Students who do not complete this form, with a proposed mark, will be required to rebook an appointment with the tutor.

The Code of Ethics for Registered Nurses (CNA, 2008) guides nursing practice and must be reflected in all aspects of clinical and lab components of Nursing 295 and evidenced in the ENP. See **APPENDIX D** and the U of A Collaborative Baccalaureate Nursing Program: Keyano College Student Handbook Nursing Program Policies for detailed descriptions of the Code of Ethics.

The tutor and the student will review the student's self-evaluation together. The tutor will finalize the student's mark for NURSING 295 clinical based upon the ENP of Students in Clinical/Seminar/Lab found in **APPENDIX C**.

It is required that each student begin their self-reflective evaluation at the beginning of the semester. Writing these evaluation entries will take self-discipline. Therefore, it is recommended that the student schedule a time each week, as soon as possible after clinical to write their self-reflective evaluation entries.

Students must receive a passing mark of (C-) 15/24 in the ENP component in order to pass the NURSING 295 course.

PLEASE NOTE:

To facilitate progress of any student with unsatisfactory performance (which is indicative of clinical failure), a remedial plan will be developed by the student and instructor.

3. **Maternal Child Family Home Visit Assignment 25% (20 clinical hours)**

Part A Ante Partum

Part B Intra Partum

Part C Post Partum

All sections of the paper are due as one on: February 8, 2013 by noon

The purpose of the 'Maternal Child Family Home Visit' paper is to synthesize nursing knowledge and practice with a family's reflection of their lived experience and events during childbirth and childrearing. The student will recount this family's birth story as it is related to the three phases of childbirth. In telling the birth story, the family's / woman's perspective and feelings toward events, care received and the meaning attached to these events will be presented. In conjunction, the student will describe how patient based advocacy was evidenced throughout the events recalled by the family.

This family project provides the student with an opportunity to increase self awareness through the interview process and compare nursing knowledge from the lived experience. It allows the student to reflect on the impact of nursing practice as the family/woman reveals their personal meaning of experiences. The assignment enables the student to develop nursing skills such as the ability to establish rapport, implement nursing models, reflect on the family's health determinants, enhance communication skills and demonstrate an attitude of inquiry. This assignment constitutes clinical hours; therefore students are expected to comply with the Nursing Program Policies as found in the Student Handbook.

For this three part "Maternal Child Family Home Visit" assignment you must utilize correct APA referencing throughout your written information. Incorporation of scholarly nursing literature is expected. Each student is to **attach photocopies of the reference papers** used in their assignment. The references are not to be emailed to your instructor. The reference papers will be returned to the student at the completion of the course. **Minimum of twelve pages will be accepted, excluding the cover page and reference pages. Do not exceed 30 pages.** All parts of the 'Maternal Child Family Home Visit' assignment will be evaluated based upon the Marking Guide as per **APPENDIX E**.

For this assignment, each student will be responsible to choose a family who has experienced the labour/delivery phase within the 12 months. Students must contact the family to arrange an initial meeting and develop a mutual plan for a second or subsequent home visits if necessary. **Consent for participation must be signed and returned to your tutor immediately following the initial meeting.** See **APPENDIX G** at the back of the syllabus for the consent form.

Part A: Antepartum

The following is a reflection about pregnancy stories. You will have the opportunity to interview a client and their family/partner about their pregnancy story. You will need to talk to two members of the family about the pregnancy. This means there will be a recounting of two stories about the same pregnancy. Incorporation of CFIM/CFAM is expected throughout this interview process. During the interview discuss the family's preparation for parenthood, the physical and psychological changes, and their adaptations of pregnancy.

Have each person recount a story of significance related to the pregnancy. The following questions may assist you to elicit information:

1. What was the best thing about this pregnancy for you (or for family members)?
2. Was there anything stressful during the pregnancy and how did you cope?
3. How has being pregnant affected your relationship with one another?
4. How has being pregnant affected your relationship with your family of origin?
5. What is the most significant thing you have learned about yourself through the experience of being pregnant?

From your experience of asking the family about their pregnancy story critique five communication strategies identified by CFIM/CFAM you used that were positive and effective. Identify and define the communication technique used, provide an example and identify areas for improvement. Incorporation of Interventive communication techniques suggested by CFIM is strongly suggested to develop this portion of the assignment.

This information must be presented in an organized logical format submitted for marking, which shows evidence of a working knowledge for application of CFIM/CFAM.

Part B: Intrapartum

You will have the opportunity to interview your patient and family about their experience in the intrapartum period.

1. Discuss the chronological account of the occurrences and behaviors with the client and family as she progressed through labour and delivery.
2. How does the information you obtained from your family compare to the information you have researched on the phases of labour and delivery.

3. Have the client identify what they found most helpful to them during their labour and delivery. Was there anything they noted during this event that could have improved their experience?
4. With the information you obtained based on the family's reflection of their labour and delivery experience, identify five considerations that you as a nurse would implement in your future nursing practice.

Part C: Post Partum

Apply the Rubin Framework to your family and discuss what stage/stages they were in as they progressed through the postpartum phases. The following questions are to be presented to your client/family regarding their postpartum phase of childbirth.

1. What preparation did the family make for the arrival of their newborn infant?
2. How did the care you received in hospital prepare you for going home with a new baby?
3. What was the most beneficial/least beneficial care you received?

4. **Clinical Exam** **60 Multiple choice questions** **25%**

The clinical exam consists of 60 multiple choice questions. You will have 90 minutes to complete the examination. Ensure you read each question carefully and select the **best** answer. Questions are directly related to the care you will provide to your clients both on the Maternal/Child Unit and in community settings, such as Public Health. Critical thinking will be tested through prioritization of nursing diagnosis and interventions.

5. School Teaching Presentation Part of ENP mark for community health rotation (6 clinical hours)

Students will participate in a teaching presentation at an assigned Elementary School. The goal of this clinical experience is for the student to develop a Health Promotion Teaching Presentation utilizing the nursing process. **The completed teaching package is to be submitted to the nursing tutor prior to presentation to peers.** The presentation package is to include a group assessment: planning itinerary with goals, objectives, and content, props, handouts and evaluation tools. The presentation will then be delivered to peers and tutor for evaluation prior to being delivered to the classroom audience.

Details of the presentation

Students will receive their assigned teacher's information from their tutor. Students must contact the teacher by e-mail/telephone as soon as possible and make arrangements for an appropriate date and time to present their project during the student's assigned Public Health Services clinical rotation.

As per marking guide in APPENDIX F, students are responsible to hand in their presentation with all materials that will be used during the presentation two days prior to presentation to peers for approval of content and activities.

Students will deliver their presentation on Thursday morning to peers and the tutor during seminar time. It is expected that the presentation will be delivered exactly as it will be conducted for the school children.

The tutor will evaluate student's use of the principles of teaching and learning as well as the use of the nursing process. Creativity and age appropriateness are expectations. Completed evaluation tools from both peers and the classroom teacher must be submitted to the tutor when completed.

1. Written component/Presentation
2. Completed Evaluation Forms (Peers, Teacher, and Instructor)

A guideline for the School Teaching Presentation can be found in **APPENDIX F**. This can be utilized as a guide to determine the quality of your written and oral presentation- the school presentation is clinical hours and therefore is included as part of your ENP mark. When completing your ENP reflection, please include reflections about the written and oral components of your school health presentation.

In order to successfully complete the NURSING 295 course, all evaluation components must be completed and submitted.

Please contact your tutor to discuss the progress of assignments.

APPENDIX A

Students Rights

1. The Student has the right to be given a written outline at the beginning of the course which states the objectives and the content of the course, and the instructor's expectations regarding attendance, evaluation, and major assignments.
2. The student has the right to notification of major changes regarding classroom procedures and the right to be notified, whenever possible, of class cancellations, time or location changes prior to the class meeting.
3. Where course content allows, the student has the right to reasonable freedom of opinion and expression in the classroom, in assignments, and in exams.
4. The student has the right to be assured that changes to the length of the program subsequent to his/her entry will not extend the program beyond the time specified upon enrollment.
5. The student has the right to seek counseling and academic advising concerning program and graduation requirements, academic regulations, admissions, and transfer, such as counseling and advising will occur within a reasonable time frame.
6. The student has the right to expect faculty members to be available for assistance outside of scheduled classes at a time that is mutually agreeable (and preferably during the instructor's regularly scheduled office hours).
7. The student has the right to confidentiality of his/her records including scholastic transcripts, health records, performance appraisals or critiques. Such documentation shall not be released to third parties without the written permission of the student except where the release of such information without permission is necessary for complying with any legal obligations imposed upon the College or their release is necessary for the protection of the health and safety of the students and staff of the College.
8. The student has the right to view any record in his/her official College file and the right to add documents to the file which might refute the contents of documents of a disparaging nature.
9. The student has the right to proper and impartial evaluation of his/her performance and the right to request a re-evaluation within time lines and procedures established by the College. The student has the right to be informed of how evaluation results will be conveyed to him or her and the appropriate timelines within which to expect such results.
10. The student has the right to accurate information pertaining to program or course information and College academic regulations including the institutional definition of plagiarism and other forms of academic misconduct.
11. The student has the right to appeal procedures printed in the College calendar and the right to know how to deal with situations that appear unjust.
12. The student has the right to freedom from being subjected to physical, verbal, mental, or sexual harassment including any indignity, injury, violence or unfair accusation and be dealt with in accordance with the Individual Rights' Policy of Keyano College.

Student Responsibilities

1. The student has the responsibility to respect the rights of fellow students, faculty, staff, administrators and other persons associated with the College.
2. The student has the responsibility to respect other people's rights to health, security, personal preferences and freedom of expression and to be familiar with the individual Rights' Policy of this institution.
3. The student has the responsibility to refrain from threatening to subject or subjecting any person to physical, verbal, mental, or sexual harassment including any indignity, injury, violence or unfair accusations.
4. The student has the responsibility to observe College and relevant government regulations, policies and procedures regarding responsible conduct within the College environment including conduct toward students, faculty, staff, administrators and property.
5. The student has the responsibility to be conversant with course content and organization, course methodology and course evaluation methods even when he/she is absent from particular classes.
6. The student has the responsibility to respect the faculty member's right to determine course content, course objectives, methodology, and evaluation.
7. The student has the responsibility to respect the faculty member's right to set deadlines for assigned work, to expect assignments to be submitted at the times specified and to establish penalties for failure to comply with deadlines. The student further has the responsibility to familiarize him/herself with the expected times and methods used to convey results of assignments, examinations or other evaluations or decisions and to know the timelines set for appeal of same.
8. The student has the responsibility to conduct him/herself in an appropriate manner and to dress in a manner that reflects the safety requirements of the course consistent with the health and safety practices of his/her chosen field of study.
9. The student has the responsibility to refrain from unduly disturbing, disrupting or otherwise interfering with studies, laboratories, lectures, work or other activities of fellow students or staff.
10. The student has the responsibility to familiarize him/herself with academic regulations, graduation requirements, and/or program completion requirements.
11. The student has the responsibility to communicate with faculty members or counselors to attempt to resolve academic and/or personal problems he/she may encounter.
12. The student has the responsibility to know the consequences of plagiarism, fraud, deceit, and/or other forms of academic and non-academic dishonesty.
13. The student has the responsibility to know and to comply with college policy as well as the policy of any employer, or host organization of practicum or clinical activities when the student is involved in placement, site visit, co-op or clinical placement on that employer's worksite.

APPENDIX B
COLLABORATIVE BACCALAUREATE NURSING PROGRAM
KEYANO COLLEGE MARKING SYSTEM

The following marking system will be used. An explanation of the criteria used with the four-point Alpha scale is as follows:

Grade	Status	Criteria
A+, A	Excellent	Exemplary integration of research-and non-research-based literature in developing, analyzing, and synthesizing ideas. Creativity is reflected. Extraordinary writing ability demonstrated. A concise, logical, well-organized assignment. Format requirements are met.
A-	Excellent	Excellent integration of research-and non-research-based literature in developing and analyzing ideas. Some creativity reflected. Excellent writing ability demonstrated. A concise, logical, well-organized assignment. Format requirements are met.
B+, B	Good	An attempt to integrate research-and non-research-based literature; however, ideas are not fully developed with minimal analysis. The demonstration of creativity is minimal. Minor revisions required with respect to presenting ideas in a concise, logical, and well organized manner. Minor format revisions are required.
B-	Good	Presents a review of research-and-non-research-based literature. Ideas are not fully developed or analyzed. Revisions required with respect to presenting ideas in a concise, logical, and well-organized manner. Format requirements are inconsistently met.
C+, C	Satisfactory	Demonstrates superficial research. General content areas identified. Minimal development of ideas, structure, organization and creativity. Definite revisions called for with respect to flow of ideas and grammatical errors. Limited application of required format.
C-	Satisfactory	Demonstrates marginal research. Lacks structure and organization of ideas. Major revisions called for with respect to flow of ideas and grammatical errors. Limited application of required format.
D+	Poor	Demonstrates poor research. Minimal structure and poor organization of ideas. Major revisions called for with respect to flow of ideas and grammatical errors. Limited application of required format
D	Minimal Pass	Content requirements not researched or addressed. The assignment has no structure or organization. Ideas are not logically or clearly presented. Consistent errors in grammar, and format.
F	Fail	Paper is plagiarized or not handed in.

Adapted with permission from the University of Alberta, Faculty of Nursing., revised by Mary Boyer, 2007.

APPENDIX C
Nursing 295

Evaluation of Nursing Practice

Nursing 295 Evaluation of Nursing Practice

STUDENT'S NAME (Print): _____

TUTOR'S NAME (Print): _____

**Student's overall performance will be assessed in each of the three categories.*

Excellent 4	Very Good 3.5	Good 3	Marginal 2.5	Unsatisfactory 0
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Excellent

Student meets the objectives at a "Level of Independence" greater than identified on the ENP, all of the time.

Very Good

Student meets the objectives at a "Level of Independence" greater than identified on the ENP, majority of the time.

Student meets the objectives at a "Level of Independence" greater than identified on the ENP some of the time.

Good

Student meets the objectives at a "Level of Independence" required on the ENP .

Marginal

The student meets the objectives at a "Level of Independence" required on the ENP inconsistently

Unsatisfactory

Student fails to meets the objectives at a "Level of Independence" required on the ENP

RC = Relevant Competency Please refer to the Graduate Competencies and Year End

Outcomes Condensed Version 2011-2012.

***Failure in any part of the six sections of the ENP will result in failure of the course.**

LEVEL OF INDEPENDENCE

In evaluating (clinical performance) objectives, the following level of independence will be used:

With assistance: The student requires direction and information.

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

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

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

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

Definition of terms:

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

Information: tutor tells student specifics about a concept, topic

Clarification: tutor, 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: tutor provides 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: tutor provides positive feedback for correct information and direction provided by the student

Consultation: student provides tutor 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 tutor now and then

RELATED COURSE OBJECTIVE:						
Demonstrate, with minimal assistance the ability to practice in accordance with Year 2 competencies, as described in the document entitled: <i>Graduate Competencies and Year-End Outcomes Condensed Version 2010-2011.</i>						
RC	1. PROFESSIONAL RESPONSIBILITY AND ACCOUNTABILITY	E	V G	G	M	US
1.2	Presents a professional image					
1.2	Demonstrates accountability for making decisions and the outcomes of those decisions					
2.2	Uses effective time management strategies in coordinating care, organizing workload, and setting priorities.					
3.1, 32.2	Demonstrates the ability to practice safely and within the limits of own competence and knowledge					
1.2, 32.2	Demonstrates initiative and responsibility to accurately assess and meet own learning needs and implements learning goals to maximize and or improve nursing care					
3.2, 4.2 16.2	Ensures personal, client and colleague safety by practicing within the policies and procedures of the agency/organization					
RELATED COURSE OBJECTIVES :						
Demonstrate, with minimal assistance, the ability to perform intermediate health assessments with healthy individuals across the lifespan in the context of family within a community and basic assessment of the childbearing family.						
Demonstrate, with minimal assistance, the ability to manage restoration, rehabilitation, and support activities for clients experiencing chronic or less acute variances in health.						
Demonstrate, with minimal assistance, the ability to manage health promotion and primary prevention activities using advanced skills.						
Demonstrate, with minimal assistance, the ability to use professional and therapeutic communication skills to collaborate with healthy clients, clients experiencing chronic or less acute variances in health across the life span in community based settings, homes and some acute care centres.						
Demonstrate, with minimal assistance the ability to engage in evidence-based practice.						
Demonstrate , with minimal assistance, the ability to integrate knowledge into clinical practice						
RC	2. KNOWLEDGE - BASED PRACTICE	E	V G	G	M	US
10.2	Applies a critical thinking approach to nursing					
5.2	Engages in strategies for social and political action at a beginning level					
10.2 18.2	Uses credible and evidence informed theory and resources to provide competent care					
19.2 23.2	Identifies appropriate nursing diagnoses from relevant assessment data, sets goals, develops plans for care, and evaluates outcomes					
15.2	Uses principles of primary health care in delivery of care at a beginning level					

18.2	Makes appropriate judgments and sound decisions in management of care based on clear and accurate understanding of rationale for care, best practice guidelines and research
7.2, 8.2, 17.2	Develops a knowledge base from nursing and other disciplines to manage current health care issues relevant to clients across the life span including the childbearing family and those experiencing chronic or less acute variances in health (i.e. health promotion and primary prevention activities, population health, and health restoration, rehabilitation and support)
27.2	Uses appropriate lines of communication to report significant issues or concerns related to delivery of nursing care and patient / client outcomes.
24.2	Produces clear, timely, relevant, and thorough charting / documentation
27.2	Establishes and maintains effective working relationships and open communication with colleagues

RELATED COURSE OBJECTIVE						
Demonstrate, with minimal assistance the ability to practice in accordance with Year 2 competencies, as described in the document entitled: <i>Graduate Competencies and Year-End Outcomes Condensed Version 2010-2011</i> .						
RC	3. ETHICAL PRACTICE	E	V G	G	M	US
25.2 26.2	Provides nursing care that respects professional boundaries, and individual rights such as informed consent, confidentiality, client autonomy, and advocacy					
25.2 , 26.2	Demonstrates respect for cultural, spiritual, and individual values, beliefs, and opinions of peers, colleagues, and clients.					
25.2	Identifies potential effect(s) of own values, beliefs, and experiences on relationships with clients, and uses this self awareness to support provision of competent care					
27.1	Establishes therapeutic and caring relationships with clients.					
RELATED COURSE OBJECTIVE						
Demonstrate with minimal assistance, the ability to establish a helping relationship with clients.						
RC	4. SERVICE TO PUBLIC	E	V G	G	M	US
27.1	Demonstrates skills for collaborative team work, including knowledge of scope of practice.					
28.2 29.2	Demonstrates beginning leadership, management, and administration skills					
RELATED COURSE OBJECTIVE:						
Demonstrate, with minimal assistance the ability to practice in accordance with Year 2 competencies, as described in the document entitled: <i>Graduate Competencies and Year-End Outcomes Condensed Version 2010-2011</i> .						
RC	5. SELF-REGULATION	E	V G	G	M	US
31.2	Demonstrates with minimal assistance an understanding of the CARNA practice standards and competencies in relation to the development of own nursing practice					
RELATED COURSE OBJECTIVE:						
Demonstrate, with minimal assistance, the processes of self-directed learning, critical thinking, and context-based learning in all learning activities.						
RC	6. CONTEXT BASED LEARNING	E	V G	G	M	US
33.2.1	With guidance, directs own learning					
33.2.2	With guidance uses critical thinking skills to facilitate learning of the group					
33.2.3	With guidance effectively uses group process to facilitate learning of the group.					

Nursing 295 Evaluation of Nursing Practice Summary Comments

MID-TERM COMMENTS:

1. Professional Responsibility and Accountability
2. Knowledge-Based Practice
3. Ethical Practice
4. Service to Public
5. Self regulation
6. Context-Based Learning

Mid-term Recommendations for clinical performance development:

Mid-term:

Student's Name Signature _____ Date

Tutor's Name 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.*

Nursing 295 Evaluation of Nursing Practice

FINAL COMMENTS:

1. Professional Responsibility and Accountability
2. Knowledge-Based Practice
3. Ethical Practice
4. Service to Public
5. Self regulation
6. Context-Based Learning

Final Evaluation:

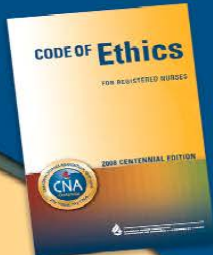
Student's Name **Signature** _____ **Date**

Tutor's Name **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.*

Appendix D

Code of Ethics for Registered Nurses



CODE OF **Ethics**

FOR REGISTERED NURSES

Nursing Values and Ethical Responsibilities

The core ethical responsibilities central to ethical nursing practice are articulated through the code's seven primary values and accompanying responsibility statements. See the code to read the responsibility statements connected with each of these seven values.


1. ***Providing safe, compassionate, competent and ethical care***
2. ***Promoting health and well-being***
3. ***Promoting and respecting informed decision-making***
4. ***Preserving dignity***
5. ***Maintaining privacy and confidentiality***
6. ***Promoting justice***
7. ***Being accountable***

Ethical Endeavours

Ethical nursing practice involves endeavouring to address broad aspects of social justice that are associated with health and well-being. These aspects relate to the need for change in systems and societal structures in order to create greater equity for all. The code contains thirteen statements entitled "ethical endeavours" that are intended to guide nurses in their practice.

TO OBTAIN A COPY OF THE *CODE OF ETHICS FOR REGISTERED NURSES*, VISIT OUR WEBSITE AT

www.cna-aiic.ca

 CANADIAN NURSES ASSOCIATION
ASSOCIATION DES INFIRMIÈRES ET INFIRMIERS DU CANADA

Canadian Nurses Association. (2008). *Code of Ethics for Registered Nurses*. Ottawa, ON: Author.

APPENDIX E

NURSING 295 Marking Guide for Maternal Child Family Home Visit					
	A/ A-	B+ / B / B-	C+ / C	C-	D / F
Antepartum	Two stories of significance about the same pregnancy are evident and clearly recounted. A detailed mother/family reflection of preparation for childbirth/parenthood that reveals role changes, physical, psychosocial, and emotional changes and adaptations for the mother and family is compared to scholarly literature. Included EDC, prenatal and the family participation in health promotion activities to prepare for childbirth. Comprehensive CFAM assessment completed. Display of linkage between CFAM assessment and the family's health determinants is evident. Windshield survey detailed. Relevant hypothesis formulated. Define/evidence of and reference five effective CFIM communication strategies and techniques utilized to elicit positive responses. Describe and provide an example of how each strategy and communication technique utilized "fit" the family and would be beneficial to effect change. (Rationale for using a specific strategy). Describe and provide an example of what you would	Evidence of one or two stories of significance to pregnancy is identified. The mother/family reflection about preparation for childbirth and / or parenthood is present but lacking some detail. Missing wither EDC, prenatal or family participation in health promotion activities. Integration of scholarly literature. CFAM assessment is provided with one component missing. Linkage between CFAM and health determinants is weak. Windshield survey could be more detailed. Hypothesis pertains to presented data. Five communication techniques are provided and referenced although definitions and/or examples are absent. Areas for improvement for communication are reviewed. A very good description of how you would maintain/change your future nursing	One and/or two stories of significance are indicated. Very brief mother/family reflection about preparation for childbirth/parenthood. Missing revelations about role changes, physical, emotional, or psychosocial changes. Scholarly literature integration poor. Missing one or two CFAM components. Lacks evidence of linkage between CFAM and the family's health determinants. Windshield survey not comprehensive. Hypothesis does not correlate to presented data. Less than five communication techniques are identified and examples are vague and do not indicate the elicited response. A brief description of what you would maintain/change for	The birth story is revealed by only one person and lacks family participation and perspectives. Minimal scholarly literature integration. Superficial assessment that has inadequate or minimal linking between CFAM, health determinants and health promotion strategies. Windshield survey minimal. No hypothesis. Three communication techniques are superficially identified and do not include any responses or 'fit and effectiveness' of strategies. One of the descriptions that you would maintain/change for future nursing practice is missing and the example provided is vague.	Birth stories are vague; provide an account of greater than one pregnancy. Lacking reflection of mother's preparation for childbirth/parenthood and changes occurring absent. Minimal scholarly literature. Missing major components of CFAM. Utilization of CFAM assessment and health determinants are not evident in the assignment. Missing windshield survey. No hypothesis included. One or two communication techniques are identified. The descriptions that you would maintain/change for future practice are vague or absent.

	maintain/change for your future nursing practice.	practice is included.	future practice is included.		
NURSING 295 Marking Guide for Maternal Child Family Home Visit					
	A/ A-	B+ / B / B-	C+ / C	C-	D / F
Intra-partum	The labor and delivery experience is chronologically and clearly recounted from latent phase to end of 4 th stage. The phases and stages of labour and delivery are identified and compared to a credible maternal/child literature. An excellent descriptive account of experiences the client or family identified is recounted. Identification, with examples, and explanation of two areas that would have improved the family experiences are included. Identify and compare their labor and delivery events to credible literature reflecting Labor and Delivery, family roles, father's role and mother's role, and nurse's role. Reflect and explain how this knowledge will influence your future nursing practice and interventions.	The labour and delivery experience is chronologically and clearly recounted. There may be some gaps in the experience. The phases and stages of labour and delivery are identified and compared to a credible source. An account of at least two positive experiences the client or family identified is recounted. Two areas identified by the family that would have improved their experience are explained. Identify and compare their events of labor and delivery to relevant literature, family roles, father/mother roles and nursing roles. Briefly reflects how this knowledge will influence future nursing practice and interventions.	The labor and delivery experience is recounted. The phases and stages of labour and delivery are identified but not compared to a credible literature. An account of positive experiences the client or family identified is recounted, although lacks supporting literature. One relevant area that would have improved the family's labor and delivery experience is vaguely noted. Brief account of implications for nursing are included and superficial reflection is provided.	Concepts of the labor and delivery experience are missing; the information presented is vague and not compared to nursing literature. A superficial account of positive family labor and delivery experience is included. Superficial or non-relevant areas are mentioned that would have improved the family's labor and delivery experience. Reflection of nursing practice is superficial and not reflective of maternal child nursing.	The labor and delivery experience is sketchy / not recounted and lacks supportive literature. Examples of the family's positive experiences are absent; and areas for improvement not included. Nursing implications and reflection of nursing practice is vague and/or absent.
Post-Partum	A comprehensive reflection of the patient's information, determines various aspects of Rubin's stages the mother and/or family experienced as they progressed through the postpartum phases. Provide examples using credible literature to support data.	A reflection of Rubin's stages the family experienced during the postpartum phases is included. Parent's birth story examples are provided; literature is integrated & linked to parent's story.	One or more stages of Rubin's model are absent. Examples are provided but are superficial. Limited integration of literature to support parent's birth story.	One or more stages of Rubin's model are absent. Family experience examples are vague or absent. Limited application of supportive literature with family experiences and / or	Two of more stages of Rubin's model are absent. Family examples are not relevant and vague. Literature is not relevant / unsupportive of Rubin's model and

				explanation of events.	family experiences.
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NURSING 295 Marking Guide for Maternal Child Family Home Visit

	A/ A-	B+ / B / B-	C+ / C	C-	D / F
APA Format/ Content	<p>APA format followed throughout. Scholarly paper, organized & excellent writing demonstrated. Content is clearly presented with minimal spelling and grammatical errors. Leveled headings are utilized to organize paper. Good integration of scholarly nursing literature.</p> <p>Signed consent submitted to tutor immediately following initial home visit.</p>	<p>APA format requires minimal revision. Scholarly paper & organized. Content is presented with few spelling and grammatical errors.</p> <p>Signed consent submitted to tutor days after initial home visit.</p>	<p>APA format requires some revision. Paper requires organization. Content is presented with several spelling and grammatical errors.</p> <p>Signed consent submitted to tutor greater than 1 week following initial home visit.</p>	<p>APA format requires considerable revision. Paper has acceptable content, although requires structure, organization. Spelling and grammatical errors are evident.</p> <p>Signed consent submitted to tutor with paper on due date.</p>	<p>APA format is not followed. Organization and scope of ideas are inadequate, with many grammar and spelling errors.</p> <p>Consent is not signed or consent is not submitted with paper on due date; Evidence of plagiarism Paper not handed in.</p>

APPENDIX F

NURSING 295 School Teaching Presentation Guideline

Topic Assessment	Identifies presentation topic. Scholarly assessment data with literature based analysis that is concise and well organized. Assessment encompasses age, growth & development, grade, number of students, existing knowledge, skill base, learning needs, motivation and readiness, and presentation time frame. Assessment is based on assigned classroom students.
Goals	Clear, detailed measurable goals that are specific, concise and attainable within an appropriate time frame. Identifies both teacher (N295 student) and children's learning goals.
Plan, Teaching Strategies and Content	Plan well organized. Objectives and strategies are age appropriate, varied, creative, and appropriately linked to the goals. Content is well developed and aligns well with assessment and strategies. Complete presentation material and equipment is handed in to tutor and school teacher 2 days (minimum) prior to presentation to peers. Plan is supported by appropriate and current scholarly references for teaching and learning, growth and development, topic content and presentation methods.
Evaluation forms	Teacher and Peer evaluation tool is well developed indicating presentation date and classroom teacher signature. Completed forms are submitted to tutor immediately after peer evaluation and classroom presentation.
APA format	Followed APA format consistently for references.
Presentation to peers and classroom	The student articulates & provides: 1) Clear objective and goals 2) Presentation is well paced and organized filling the time frame 3) Content relates to health topic
Presentation characteristics	Evidence of quality presentation: 1) Articulates the content 2) Maintains eye contact with audience 3) Voice, volume and tone adequate

- | | |
|--|--|
| | 4) Engaging the audience
5) Professional appearance and posture |
|--|--|

APPENDIX G



CONSENT FOR COLLECTION OF PERSONAL INFORMATION
DURING HOME VISITS (NURSING)

University of Alberta Collaborative Baccalaureate Nursing Program: Keyano College

I hereby give consent for a Nursing student of the Collaborative Baccalaureate Nursing program at Keyano College to conduct home visits. By signature of this document, I acknowledge and understand the following:

- 1. The home visits provide the student with an opportunity to engage in the establishment of a nurse-family relationship;
2. The focus of the visit(s) is to conduct an assessment of an individual and/or family;
3. All data collected will remain confidential and if the data is used in an assignment or report, names and identifying characteristics will be removed or fictitious names and circumstances will be used to protect the identity of family members.
4. Upon completion of the course, the student will delete the data collected from their computer.

By signing this document, I release Keyano College from any liability associated with the student's home visits.

PRINT Name of Family Member SIGNATURE Family Member Date

Family's Phone Number

PRINT Name of Student SIGNATURE Student Date

PRINT Name of Instructor SIGNATURE Instructor Date

This personal information is protected by the provisions of the Alberta Freedom of Information and Protection of Privacy Act (FOIP). If you have any questions about the collection or use of this information, please contact: FOIP Coordinator, Keyano College, 8115 Franklin Avenue, Fort McMurray, Alberta, T9H 2H7, (780) 791-4800.

Prepared by: _____ **Date:** _____

Approved By: _____ **Date:** _____

Approved by: _____ **Date:** _____