



A POLYTECHNIC INSTITUTION

School of Health Sciences

Program: Bachelor of Science in Nursing

NURS 8330
Nursing Practicum 8: Leadership

Start Date:	January 2008	End Date:	May 2008
Total Hours:	312	Total Weeks:	8
Hours/Week:	35.5	Term/Level:	7
	Practicum Experience	Course Credits:	13
Prerequisites		NURS 8330 is a Corequisite for:	
Course No.	Course Name	Course No.	Course Name
NURS 8132	Nursing Practicum 7	NURS 8300	Leadership in Nursing
NURS 8010	Systematic Inquiry		

v Course Description

In this course, students will gain nursing experience in a variety of contexts of practice. Students will be expected to provide knowledgeable and safe nursing care to groups of clients. Also, they will be expected to synthesize a process that helps them develop leadership skills and activities that occur as part of the nurse's role.

v Detailed Course Description

NURS 8330 is a preceptorship course focusing on the nursing care of people, families, and/or groups experiencing health issues requiring nursing care. Emphasis is placed on integrating the depth of knowledge, skills, attitudes, and judgments relevant to the practice of professional nursing and the development of nursing leadership. The context of practice may be hospital or community settings.

v Evaluation

Satisfactory/Unsatisfactory standing based on:

- Satisfactory student, preceptor and instructor evaluation of course outcomes.
- Submission of satisfactory self-evaluation notes.
- Two satisfactory reflective professional journals that analyzes own presentation and nursing agency in the practice setting.
- All evaluation components must be completed to achieve satisfactory standing in the course.

v Course Learning Outcomes/Competencies

This practicum experience is with people, families, and/or groups experiencing health issues requiring nursing care. Collaborating with the health team for referrals and discharge planning will be part of the student role. Also, charge nurse responsibilities may be part of the role.

In this context, the student will:

1. implement professional caring (rational, technical & emotive elements) that integrates a depth of nursing knowledge and skill in accordance with the Standards of Nursing Practice in British Columbia.
2. pursue shared meaning by facilitating communication with clients, families, groups and/or populations to promote health, healing and comfort, self-esteem, empowerment, growth and partnership.

v **Course Learning Outcomes/Competencies (cont'd.)**

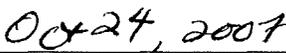
3. advocate on behalf of clients, families and groups after analyzing options.
4. integrate the family or group into care and teaching.
5. integrate systematic inquiry into practice by:
 - analyzing client issues and responding with sound judgments.
 - considering the multiple sources of nursing knowledge.
 - synthesizing critical thinking, reflection and practice.
 - remaining reflectively sceptical.
6. commit to learning as a way of anticipating future practice needs by:
 - analyzing the knowledge base and skill sets required to nurse effectively in practice setting.
 - evaluating and monitoring own practice and acting to modify it.
 - investigating practice trends.
 - assuming responsibility for own learning needs and investing time and effort in learning.
7. integrate creative leadership into practice using collaboration and independent action.
8. coordinate multidisciplinary care.
9. implement technical aspects of care with assurance.

v **Verification**

I verify that the content of this course outline is current.



Authoring Instructor

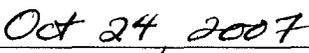


Date

I verify that this course outline has been reviewed.

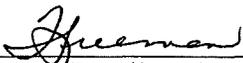


Program Head/Chief Instructor

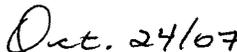


Date

I verify that this course outline complies with BCIT policy.



Dean/Associate Dean



Date

Note: Should changes be required to the content of this course outline, students will be given reasonable notice.

v Instructor(s)

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v Learning Resources

Required:

current CRNBC student membership
current CPR Level C

Equipment:

- a stethoscope
- a pen-light
- bandage scissors
- a black ink pen
- a watch with a second hand
- a photo ID (BCIT One Card) name badge
- appropriate clothing for context of practice – uniform or washable street clothes are required. If street clothes are worn, tops must cover the midriff and be loose fitting. Bottoms must cover the upper thighs and abdomen and be loose fitting. No denim clothing is allowed. Students will be sent home if dress is not appropriately professional.
- hospital duty shoes or closed-toe and closed-heel walking shoes similar to hospital duty shoes depending on context of practice. WCB will not cover injury resulting from inappropriate footwear.
- a lock may be required if you use a locker to store coats etc. while at the agency.
- access to a motor vehicle is required in community settings.

Textbooks:

- *BCIT student guidelines, policies and procedure in the Nursing program* available on-line at: <http://www.bcit.ca/health/nursing>
- Buresh, B., & Gordon, S. (2006). *From silence to voice*. (2nd ed.). Cornell University Press..
- Canadian Nurses Association. (2002). *Code of ethics for registered nurses*. Ottawa: Author.

- Prochaska, J. O., Norcross, J.C., & DiClemente, C.C. (1994). *Changing for good*. New York: Avon Books.
- College of Registered Nurses of British Columbia. (2005). *Standards for registered nursing practice in British Columbia*. Vancouver: Author.
- College of Registered Nurses of British Columbia. (2006). *Scope of practice for Registered Nurses; Standards, Limits, Conditions*. Vancouver, BC: Author.
- an assessment text

v Learning Resources (cont'd.)

- a fundamentals of nursing or clinical techniques text
- a medical-surgical nursing text
- a pharmacology text
- a laboratory and diagnostic procedures manual
- a mental health nursing text
- a family nursing text
- a maternal child nursing text
- a home-care nursing text
- texts related to the context of practice

References on Reserve in the Library:

- Boyd, M.D., Gleit, C.J., Graham, B.A., & Whitman, N.I. (1998). *Health teaching in nursing practice: A professional model*. Stamford, CT: Appleton & Lange.
- Hoeman, S.P. (1996). *Rehabilitation nursing: Process and application* (2nd ed.). St. Louis: Mosby.
- Pender, N.J. (1996). *Health promotion in nursing practice* (3rd ed.). Stamford, CT: Appleton & Lange.

v Information for Students

The following statements are in accordance with BCIT Student Regulations Policy 5002. To review the full policy, please refer to: <http://www.bcit.ca/~presoff/5002.pdf>

Assignments: Assignments must be done on an individual basis unless otherwise specified by the instructor.

Attendance/Illness: In case of illness or other unavoidable cause of absence, the student must communicate as soon as possible with his/her instructor or Program Head or Chief Instructor, indicating the reason for the absence. After an illness of three or more consecutive days, students must arrange to have a BCIT medical certificate sent to the department. Excessive absence may result in failure or immediate withdrawal from the course or program.

Cheating, Fabrication, Plagiarism and/or Dishonesty:

First Offense: Any Student in the School of Health Sciences involved in an initial act of Academic Misconduct – **Cheating, Fabrication, Plagiarism and/or Dishonesty** will receive a Zero (0) or Unsatisfactory (U) on the particular assignment and may receive a Zero (0) or Unsatisfactory (U) in the course, at the discretion of the Associate Dean.

Second Offense: Any Student in the School of Health Sciences involved in a second act of Academic Misconduct – **Cheating, Fabrication, Plagiarism and/or Dishonesty** will receive a Zero (0) or Unsatisfactory (U) on the particular assignment, a Zero (0) or Unsatisfactory (U) in that course and the Associate Dean will recommend to the BCIT Vice-President, Education and/or President, expulsion from the program.

Attempts: BCIT Nursing Program Student Guidelines, Policies and Procedures which are located online at <http://www.bcit.ca/health/nursing/> state: Applicants who have any combination of two instances of withdrawal or failure in a Nursing Theory course will be readmitted to the program with written permission from the Associate Dean, who will detail any special considerations. Applicants who have any combination of two instances of withdrawal or failure in any Nursing Practicum course(s) for academic or performance reasons, will not be readmitted to the program.

Accommodation: Any student who may require accommodation from BCIT because of a physical or mental disability should refer to BCIT's Policy on Accommodation for Students with Disabilities (Policy #4501), and contact BCIT's Disability

Resource Centre (SW1-2300, 604-451-6963) at the earliest possible time. Requests for accommodation must be made to the Disability Resource Centre, and should not be made to a course instructor or Program area.

Any student who needs special assistance in the event of a medical emergency or building evacuation (either because of a disability or for any other reason) should also promptly inform their course instructor(s) and the Disability Resource Centre of their personal circumstances.

Course Outline Changes: The material or schedule specified in this course outline may be changed by the instructor. If changes are required, they will be announced in class.

v Learning Processes Involved in this Course

- **Professionalism:** with increasing independence, students work to integrate the rational, technical and emotive elements of caring in this practice setting. Students do complete and focused assessments of clients, families, groups and the environment. They foster contexts that promote, maintain and restore health. They pursue shared meaning with clients, families and groups to establish partnerships where shared goals are achieved, humanistic care is given and required resources are identified. Students objectively manage patients, families and groups in changing situations using sound clinical judgments based on increasing depth of nursing knowledge and skill. This includes assessment, analysis, development of plans of care, implementation of care, evaluation of care and modification of the plan. Students advocate on behalf of clients, families and groups after analyzing options. They may need to validate decisions based on specialized knowledge and skill. Students change their practice to meet the needs of clients, families and groups.

They integrate a system of professional values and ethics and are committed to providing nursing service to people. They respect cultural diversity, value client capacity and expertise in self-care, respect the client's right to choose, and value family involvement in care. They appreciate the challenges clients experience when learning new abilities. They are sensitive to stereotypes that exist regarding people, lifestyles and health problems. They are aware of personal values and reactions and the effects they might have on others.

They recognize that the client is part of a community so plan for discharge throughout the stay in the setting.

- **Communication:** with increasing independence, students work to resolve problems or issues with clients, families and groups in emotionally-charged and/or rapidly changing situations. Students continue using positive, pro-client caring attitudes and skills and various media to communicate effectively with them. They promote self-esteem, empowerment, health, comfort, growth and partnership with clients, families and groups. They analyze client, family and group learning needs including those related to health promotion, rehabilitation and illness and injury prevention and integrate teaching into the plan of care.

They integrate the family or group into care and teaching. They document and report pertinent assessments and nursing care.

Students interact effectively as a group member. They independently establish working relationships with group members, give and receive constructive feedback, monitor group function and share ideas, thinking and learning materials. Students engage in health teaching in a variety of contexts. Students evaluate the effectiveness of teaching.

- **Systematic Inquiry:** students are increasingly independent with critical thinking and use a variety of sources of knowing to guide care. They use research findings as a source in discussions with colleagues. They constructively evaluate research to determine the usefulness of findings for decision-making in nursing practice.

Students question unclear decisions made by themselves and others. They evaluate strategies to promote rehabilitation, illness and injury prevention, and self-care to promote health outcomes. They are reflecting-in-action and can model this skill for colleagues.

They analyze the uniqueness of each patient or patient situation and client issue. They are independent with critical thinking such as identifying assumptions, evidence, alternatives and consequences to formulate beliefs

v **Learning Processes Involved in this Course (cont'd.)**

and take action in nursing practice. This action includes that which takes place within a legal-ethical framework.

- **Professional Growth:** students are committed to professional growth. They invest time and effort in their learning. They form learning partnerships that are collaborative, caring and respectful. They accept responsibility for their learning needs by independently talking with colleagues, preceptors and instructors about their practice, articulating their perspective, and accepting and using feedback to develop competence. They evaluate their care using professional nursing standards and modify their practice accordingly.

Students analyze the knowledge based skill sets required to nurse effectively in the practice area. They are responsible for attaining and maintaining a safe level of skill performance and are responsible and accountable for their actions. Students combine systematic inquiry, reflection and experience to create competent practice. They learn to become aware of their limits such as lack of focus, fatigue and/or overconfidence by anticipating these issues and dealing with them proactively.

- **Creative Leadership:** students are learning to manage a larger group of clients by becoming more organized, efficient and quicker in giving care. They learn to anticipate the work that will be required throughout the day and set priorities to achieve this. Students share their expertise to achieve mutually agreed upon goals. They understand power, influence and policy development and synthesize these concepts to initiate and participate in the change process. They begin to foster the development of others. They clearly describe their role in the health care system and their particular skills in this practice setting. Therefore, they understand nursing leadership in this context of practice.

Students establish collaborative partnerships with colleagues. They work to foster collaborative decision-making and referral among nurses and other members of the health care team. They evaluate the partnerships established and use team building, negotiation and conflict resolution skills to collaborate with people and resolve issues. They share expertise to achieve mutually agreed upon goals. They interact assertively and demonstrate initiative within groups. They take a leadership role in advocating for clients and families. They take an active role in assessment of discharge needs and discharge planning. They present themselves as a professional nurse and articulate the agency of the nurse to others.

Students reflect on the context of their health organization within the health care system. They efficiently and responsibly use information and communication technology.

- **Technical Skills:** students are safe with specialized technical skills and demonstrate high levels of assessment skills (including assessment technology) with patients. They implement a logical series of actions, they are coordinated, they give safe care and speed is within reasonable limits. The novice level of practice is achieved. Students review agency policy regarding skills and additional technical skills are learned based on student need and the context of practice.

