



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

School of Health Sciences

Program: Nursing

Course Outline **Part A**

NURS 1040

Professional Practice Seminar 1

Hours/Week:	2	Total Hours:	34	Term/Level:	1
Lecture:		Total Weeks:	17	Credits:	2
Lab:					
Other:	Seminar to Groups of 24				

Prerequisites

NURS 1040 is a Prerequisite for:

Course No. Course Name

Course No. Course Name

NURS 2040 Professional Practice Seminar 2

NURS 2030 Nursing Practicum 2

Course Goals

Professional Practice Seminar 1 facilitates student understanding of the professional practice of nursing.

Course Description

This seminar course presents the BCIT Nursing model and philosophy, and promotes a beginning understanding of the professional basis of nursing practice. Computer work, projects, written assignments, and discussions with peers and faculty are part of the course.

Evaluation

- A paper that asks students to compare and contrast the image of nursing described in the professional literature, the image portrayed in the media, the practicing nurse's view of nursing's image and the student's view of the image.
- An annotated bibliography related to one of the concepts presented in the course.
- An assignment that asks students to analyze assumptions present in a scenario and identify alternate perspectives that could be taken.
- Attendance and participation in class and activities.

Students will participate in developing the evaluation criteria for the above evaluation strategies and/or will participate in deciding the percentage of marks assigned to each.

All written assignments must be word processed.

Course Outcomes

The student will:

1. Appreciate the impact of the philosophical basis of the BCIT Nursing Program on nursing practice.
2. Discuss the interrelationships of the BCIT Nursing model and their impact on the role of the nurse in practice.
3. Discuss the interrelationships of the patterns of knowing in nursing and their contribution to nursing practice and education.
4. Propose research questions from identified problems or issues related to nursing or health care.
5. Understand the concept of research based practice and its relevance for nursing practice and health care.
6. Understand the role of caring in nursing and its contribution to the health of people.
7. Discuss the concept of "profession" and its relationship to nursing and the professional association.
8. Appreciate the role of nursing in the current health care system from a historical perspective.
9. Become aware of their own leadership / followership style.
10. Understand the nurse's role re: advocacy, health promotion, primary health care and referral.
11. Identify assumptions underlying course concepts.

Process Threads Relevant to this Content

- *Professionalism:* Students will discuss the various aspects of professional practice so that they develop an understanding of the professional nursing role.
- *Communication:* Students will thoughtfully discuss course concepts verbally and in writing. They will learn to be clear and concise in their arguments and to use relevant research and literature to support their views. Practicing nurses will be interviewed in this course.
- *Systematic Inquiry:* The ways of knowing including the empirical will be discussed in this course. Students will learn to critically review literature and research. They will be encouraged to identify assumptions, suggest alternatives and consequences and be clear on the context of issues. They will be encouraged to provide evidence for their views.
- *Learning:* Students will be required to take responsibility for their learning. Individual learning styles will be discussed. They may work in reading groups so they will be responsible for sharing their thoughts clearly in class.
- *Leadership:* Students will discuss concepts of leadership in the class. Issues in decision making, priority setting, and leadership/followership styles will be discussed using case studies. Students will be encouraged to identify their style and consider ways to develop it.

Course Record

Developed by: L. Fried Nursing Date: May 21, 1996
Instructor Name and Department (signature)

Revised by: _____ Date: _____
Instructor Name and Department (signature)

Approved by: M. Bennett Rising Start Date: August, 1996
Associate Dean / Program Head (signature)



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY
School of Health Sciences
Program: Nursing

Course Outline **Part B**

NURS 1040
Professional Practice Seminar 1

Effective Date

August, 1996

Instructor(s)

Lynn Field	Office No.:	SE12 - 418	Phone:	451-6945
	Office Hrs.:	posted at desk		
Selma Whiteside	Office No.:	SE12 - 418	Phone:	451-6949
	Office Hrs.:	posted at desk		

Text(s) and Equipment

Required:

Canadian Nurses Association. (1991). *Code of Ethics for Nurses*. Ottawa: Author.

Kerr, J.R., and MacPhail, J. (1996). *Canadian Nursing: Issues and perspectives*. (third edition). St. Louis: Mosby.

Registered Nurses Association of British Columbia. (1992). *Standards of Nursing Practice in British Columbia*. Vancouver: Author.

Snyder, M. (1992). *Independent Nursing Interventions*. (second edition). Albany, NY: Delmar.

RNABC Membership — Cost \$21.40 Per Year.

Recommended:

one of: Craven, R.F., and Hirnle, C.J. (1996). *Fundamental of Nursing: Human health and function*. (second edition). Philadelphia: Lippincott.

DuGas, B.W., and Knor, E.R. (1995). *Nursing Foundations: A Canadian perspective*. Scarborough, ON: Appleton and Lange Canada.

one of: LeMone, P., and Burke, K.M. (1996). *Medical-Surgical Nursing: Critical thinking in client care*. Menlo Park, CA: Addison Wesley.

Smeltzer, S.C., and Bare, B.C. (1996). *Brunner and Suddarth's Textbook of Medical-Surgical Nursing*. (eight edition). Philadelphia: Lippincott.

American Psychological Association. (1994). *Publication Manual of the American Psychological Association*. (4th ed.). Washington, D.C. Author.
A Medical Dictionary.

Course Notes (Policies and Procedures)

1. Students are encouraged to identify individual learning needs that may be met in this course. Please talk with the teacher to see how this might be accomplished.
2. During the first class, the evaluation methods will be discussed and the percentage of marks assigned to each will be identified.
3. The reference readings (except those from required or recommended texts, booklets, etc.) are on reserve in the library. The material will be on one day loan.
4. All the readings do not have to be read by every student. Reading groups can be formed so that readings are distributed among the members. Reading groups should have a maximum of four members to ease working relationships and communication between members.
5. Students will participate in a verbal review of the course at midterm and the end of the term. This review will include a discussion of teaching methods, resources, and course structure. The midterm review is aimed at meeting the needs of the students currently taking the course. The end of term review is aimed at modifying the course for the next class.

Participation / Attendance:

1. Attendance is required in this course because of the importance of dialogue in thinking and learning. The different viewpoints shared during the seminar will help expand the thinking of all participants. If students are absent for more than 10% of the planned activities without a medical certificate they may be prohibited from completing the course.
2. It is not enough that people are present in body. People must participate so that all can expand their thinking about the subject being discussed. People will be called randomly to share their thoughts.

Written Assignments:

1. As the purpose of the written assignments is to help students develop their ability to reason and reflect, students may request assistance with the written assignments as they need it and as faculty are able to give it. There is no penalty for this assistance.
2. Marks for papers will be either 0%, 30%, 45%, 60%, 75%, or 90%.
3. Marks will be assigned according to three criteria; content of the paper, structure or organization of the paper, and mechanics of the writing. The content of the paper refers to the thinking demonstrated:
 - The thinking shows analysis — assumptions are identified, consequences are outlined and alternatives are given. The context in which the assumptions are valid is also identified.
 - There is evidence given to support the analysis of the topic. The evidence is clearly stated, of sufficient quantity to support the idea and relevant to the topic.

Course Notes (Policies and Procedures) (Continued)

- The complexity of the issue being discussed is clear. Alternatives discussed address a number of perspectives that could be taken about the topic. Solutions recognize these diverse perspectives and the particular context of the situation.

The structure of the paper refers to how it is organized:

- The tone or style of the paper is appropriate to the audience. Academic papers avoid slang language, use specific words and clearly describe concepts. The style clearly indicates that the thoughts are written for academic purposes, not for a casual discussion with friends.
- There is an introduction that presents the idea(s) being discussed and a conclusion that summarizes and extends the ideas.
- A bibliography in appropriate format is included.
- A central idea organizes the paper and paragraphs form units of thought.
- Paragraphs include a topic sentence and details that support the topic sentence.
- The links between paragraphs provide smooth transitions.

The mechanics of writing papers refers to sentence structure, grammar, spelling, punctuation, and verb tense. All must be according to English conventions.

4. The marks will be assigned as follows:
 - The 0% is a 30% paper handed in late.
 - The 30% paper will have significant gaps in all three criteria.
 - The 45% paper will have significant gaps in at least one criteria and some gaps in the others.
 - The 60% paper will have some gaps in all criteria, but no criteria show significant gaps.
 - The 75% paper will have only a few gaps in the criteria, particularly content and structure.
 - The 90% paper will; have no gaps in content and structure, but may have some gaps in mechanics.
5. Students who question a mark may request a reread of their assignment. Another instructor will read the paper and assign the final mark. Only one reread may be requested for any assignment.
6. Students may negotiate an extension of the submission date for all assignments as long as the extension does not exceed the final deadline for submission of that assignment. Extensions must be negotiated at least 24 hours before the assignment is due.
7. If an assignment is late without a negotiated extension, the mark for the assignment will be dropped one level below what would be assigned if it was submitted on time, i.e. from 90% to 75%.
8. All assignments must be completed to achieve credit for the course.

Assignment Details

A. ASSUMPTION ANALYSIS — Due Week 7 (September 27). Final Deadline October 11.

Choose one of the following scenarios and identify the assumptions behind the decisions the people are making. Then suggest how these people could check the validity of these assumptions. Once this is done, suggest at least two alternative perspectives that could be taken by the person in the scenario.

Keep length to a maximum of 3 pages.

Scenario 1

Joan is 35 years old. She is married and has two preschool children. She is in level 3 of the Nursing Program at BCIT. She has watched her family do more and more things without her since the program began. She is having trouble with her courses, is getting more and more tired, and feels like an absentee mother and wife. If only things would slow down, she would be able to cope better. To ease the situation, she is considering quitting school and returning to full time parenting. She thinks the family will appreciate this sacrifice she will make on their behalf because it will mean that the family has more money and can spend more time together. She will be able to participate more as a partner with her spouse and she will feel more capable as a person and will finally feel refreshed and energetic.

Scenario 2

Patty is a medical clinical nurse specialist at the local hospital. She has been meeting once a week with a group of head nurses and after three sessions, she is very concerned about Joyce, one of the head nurses. Joyce is a head nurse who is very technically competent, but she has trouble keeping senior staff for any length of time. They all want to transfer off her unit to another medical unit in the hospital. Patty thinks that this staff turnover is a direct result of Joyce's poor interpersonal skills. She decides to help Joyce see herself as others do so drafts a memo to Joyce. In the memo, she notes that Joyce doesn't participate in the weekly meetings, often brings work to do during the sessions, and sometimes leaves early on one excuse or another. Patty says that this behavior has a negative impact on the group of people meeting each week and probably indicates Joyce's ability to work effectively in groups. Patty asks that Joyce work to cooperate more equally in the group so that she will be seen as a partner in the hospital organization. Patty goes on to say that if Joyce can turn her behavior around, she will have more power and prestige in the hospital.

Scenario 3

Jennifer is 42 years old. She is fed up with her life. She was divorced a year ago and is finding it difficult to re-establish connections with her pre-marriage friends. She phones them to arrange outings, but they make excuses for being unable to join her. She works as a senior nurse in the ICU in Edmonton. Although she is not hurting financially in her current job, she feels her employers do not recognize her talents. Recently, she felt insulted when an outside expert was brought in to establish a clinical protocol for patients about to be extubated - a task that Jennifer proudly feels to be her area of expertise. So, she decided to make a change and applied for a number of jobs without the hospital knowing. Jennifer has been offered an ICU nurse position in a large Vancouver hospital. It would be a sideways move both financially and professionally. At the interview, she felt flattered by the person responsible for hiring the new employee. She was told that her qualifications were highly regarded. Because of that interview experience, she decided to accept the job. She thinks that it will be an improvement to work in a job where her talents will be recognized and rewarded. Also, she thinks that the move will be an exciting new direction for her personal life.

Assignment Details (Continued)

Scenario 4

Patricia is 26 years old. She has been nursing on this medical unit since graduation almost three years ago. She notices that two nurses, Bob and Marianne, are disruptive influences. Their behavior during report is difficult to listen to. They make sarcastic and derogatory comments about patients and they deride the assessments and recommendations of the nurses reporting. Whenever she is supposed to go on a break, they take much more time than allowed so she is late going. She is very concerned about the care they give to people — they are in and out of rooms so quickly, they couldn't possibly give decent care. Patricia is still one of the youngest nurses on the ward so she does not have the seniority to approach these nurse directly. She decides to share her feelings with two of the oldest nurses on the unit. She thinks that the three of them can make Bob and Marianne stop being so disruptive. The unit would be a great place to work if their behavior changed.

B. ANNOTATED BIBLIOGRAPHY — Due Week 12 (November 8). Final Deadline November 15.

Select a concept discussed in the course (for example: advocacy, research based practice, health promotion, leadership, etc.) and read at least 10 journal articles, book chapters, discussion papers, pamphlets, etc. Briefly summarize the thoughts of each author then summarize the thoughts of all the authors. The bibliography must be referenced accurately.

Keep length to a maximum of 5 pages.

C. IMAGE PAPER — Due Week 16 (December 4). Final Deadline December 11.

Review the literature to summarize the thoughts about the image of Nursing today. Review two examples of the image of nursing portrayed in one type of media (radio, television, books, movies). Interview a practicing nurse to identify his or her thoughts about the image of nursing. Compare and contrast these three views with your view of the image of nursing today.

Keep length to a maximum of 10 pages.



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

School of Health Sciences

Program: Nursing

Option:

Schedule

NURS 1040

Professional Practice Seminar 1

Week of/ Number	Outcome/Material Covered	Reference/Reading
August 19 1	Introduction: <ul style="list-style-type: none"> • Goal setting • Seminar Process — purpose and guidelines, reading, questioning, thinking • Course requirements — participation, assignments, policies, procedures 	Brookfield, S.D. (1987). What it means to think critically. In <i>Developing Critical Thinkers</i> . San Francisco: Jossey-Bass. pp. 3–14.
August 26 2	Section I — Nursing and Health Care History of Nursing in Canada/Change in: <ul style="list-style-type: none"> • Philosophy of people and health • Profession, ethics, standards of care • Health Care System 	Kerr and MacPhail — Chapters 1 and 2, pp. 216–221. DuGas and Knor — Chapter 1
September 2 3	BCIT Nursing Program Framework: <ul style="list-style-type: none"> • Philosophy — phenomenology, critical social theory, humanism <ul style="list-style-type: none"> ▸ Assumptions, consequences, impact on nursing and teaching • Central Constructs — specialty nursing, partnership, technology as practice <ul style="list-style-type: none"> ▸ Purpose in the program • Content Threads — human being, context, health, professional caring <ul style="list-style-type: none"> ▸ Assumptions, consequences, interrelationships • Process Threads — professionalism, communication, systematic inquiry, learning, creative leadership, technical skills <ul style="list-style-type: none"> ▸ Interrelationships and impact on nursing role 	BCIT Nursing Program Overview Stevens, P.E. (1989). "A Critical Social Reconceptualization of Environment in Nursing: Implications for Methodology." <i>Adv. Nurs. Sci.</i> 11(4): pp. 56–68. Munhall, P.L. (1994). <i>Revisioning Phenomenology: Nursing and Health Science Research</i> . NY: NLN Press. pp. 1–11. Chally, P.S. (1992). "Empowerment Through Teaching," <i>J. Nurs. Ed.</i> 31(3): pp. 117–120. Ross, L. (1995). "The Spiritual Dimension: Its importance to patients' health, well-being, and quality of life and its implications for nursing practice," <i>Int. J. Nurs. Stud.</i> 32(5): pp. 457–468. Baumgart, A.J., and Larsen, J. (1992). <i>Canadian Nursing Faces the Future</i> . Chapter 15. DuGas and Knor — Chapter 2, pp. 310–312.

Week of/ Number	Outcome/Material Covered	Reference/Reading
September 9 4	Professional Caring: <ul style="list-style-type: none"> • Theories of Caring • Rational, emotive, and technical skills <ul style="list-style-type: none"> ▸ impact on nursing role • Relationship to health and healing • Emotive Skills — McMaster Nursing Model — partnership, dialogue, shared meaning <ul style="list-style-type: none"> ▸ Assumptions about nursing, people, health care, and research and theory base 	<p>Roach, M.S. (1987). "Attributes of Professional Caring," in <i>The Human Act of Caring: A blueprint for the health professions</i>. Ottawa: Can. Hosp. Pub.</p> <p>McMaster Nursing Curriculum</p> <p>Wells-Federman, C.L. (1996). "Awakening the Nurse Healer Within," <i>Holist. Nurs. Pract.</i> 10(2): pp. 13–29.</p> <p>Hawthorne, D.L. and Yurkovich, N.J. (1995). "Science, Technology, Caring and the Professions: Are they compatible?" <i>J. Adv. Nurs.</i> 21: pp. 1087–1091.</p> <p>Radwin, L.E. (1995). "Knowing the Patient: A process model for individualized intervention," <i>N.R.</i> 44(6): pp. 364–370.</p>
September 16 5	Professional Caring — Rational Skills: <ul style="list-style-type: none"> • Critical Reflection — theory base • Decision making • Nursing Process 	<p>Brookfield, S. (1987). <i>Developing Critical Thinkers</i>. Chapter 1</p> <p>Brookfield, S. (1993). "On Impostership, Cultural Suicide, and Other Dangers: How nurses learn critical thinking," <i>J. Cont. Ed. Nurs.</i> 24(5): pp. 197–205.</p> <p>Snyder, Chapter 5</p> <p>DuGas and Knor, Chapter 14</p> <p>Hirnle and Craven, Chapters 8 and 9</p>

Week of/ Number	Outcome/Material Covered	Reference/Reading
September 23 6	Health Care System: <ul style="list-style-type: none"> • Funding • Delivery of Care • Roles — primary health care, health promotion, rehabilitation, advocacy, referral • Legal framework — Charter of Rights and Freedoms, criminal code, obligations re: consent, competence, etc. • Future trends 	<p>Kerr and MacPhail, Chapters 17 and 18</p> <p>Snyder, Chapter 31</p> <p>Liaschenko, J. (1995). "Ethics in the Work of Acting for Patients." <i>Adv. Nurs. Sci.</i> 18(2): pp. 1–12.</p> <p>RNABC. (1994). <i>Position Statement: Creating the new health care</i>. Vancouver: Author.</p> <p>RNABC. (1990). <i>Appropriate Use of a Registered Nurse's Knowledge and Skill: A framework for decision making</i>. Vancouver: Author.</p> <p>RNABC. (1993). <i>Advocacy</i>. Vancouver: Author.</p> <p>Government of Canada. (). <i>Charter of Rights and Freedoms</i>. Ottawa: Author.</p> <p>DuGas and Knor, Chapters 3, 4, and 5.</p> <p>Craven and Hirnle, Chapter 1.</p>
September 26 7 and October 7 8	Section II — Ways of Knowing: <ul style="list-style-type: none"> • Empirical, ethical, personal combine in the art of Nursing • Empirical Knowing: <ul style="list-style-type: none"> ▸ Research based practice — relevance to health and nursing ▸ Developing problems from nursing and health issues ▸ Accessing a literature base — differentiating between research and theory based articles, comparing findings ▸ Critique of a research article • Midterm Review of Course 	<p>Kerr and MacPhail, Chapters 9, 10, 12, and 13.</p> <p>DuGas and Knor, Chapter 7</p>
October 14 9	Ways of Knowing — Ethical Knowing: <ul style="list-style-type: none"> • Personal vs Professional Values • CNA Code of Ethics for Nurses • Assumptions, context, consequences • Legal consequences 	<p>Kerr and MacPhail, Chapters 19 and 20</p> <p>Snyder, Chapter 4</p> <p>CNA. (1991). <i>Code of Ethics for Nurses</i>. Ottawa: Author.</p> <p>DuGas and Knor, Chapter 6</p> <p>Craven and Hirnle, Chapter 3</p>

Week of/ Number	Outcome/Material Covered	Reference/Reading
October 21 10	Ways of Knowing — Personal: <ul style="list-style-type: none"> • Own way of knowing and learning • Learning theories, learning strategies 	
October 28 11	Section III — Nursing Profession:	Kerr and MacPhail, Chapters 3 and 4
November 4 12	<ul style="list-style-type: none"> • Characteristics of a profession — assumptions, consequences 	Nurses (Registered) Act
November 11 13	<ul style="list-style-type: none"> • Nurses Act • Professional Association — purpose, annual meeting, chapter meetings, role re: professional concept • Standards of Practice — relationship to characteristics of a profession, consequences, self regulation 	RNABC. (1992). <i>Standards of Nursing Practice in British Columbia</i> . Vancouver: Author. RNABC. (1996). "1995 Annual Report." <i>Nursing BC</i> . March/April. * Attend a RNABC Chapter meeting in your area before November 13. Identify issues of concern to the membership and bring these concerns to class for discussion.
November 18 14	Section IV — Creative Leadership:	Chinn, P.L., and Wheeler, C.E. (1991). <i>Peace and Power: A handbook of feminist process</i> , (third edition). NY: NLN Press. pp. 1-17.
November 25 15	<ul style="list-style-type: none"> • Leadership — Followership <ul style="list-style-type: none"> ▸ Theories, own abilities 	DiRienzo, S.M. (1994). "A Challenge to Nursing: Promoting followers as well as leaders," <i>Holist. Nurs. Pract.</i> 9(1): pp. 26-30.
December 2 16	<ul style="list-style-type: none"> ▸ Decision making, priority setting, credibility 	Rost, J.C. (1994). "Leadership: A new conception," <i>Holist. Nurs. Pract.</i> 9(1): pp. 1-8.
	<ul style="list-style-type: none"> • Organizations — how they work, relationships 	Wolfe, P.L. (1994). "Risk Taking: Nursing's comfort zone," <i>Holist. Nurs. Pract.</i> 8(2): pp. 43-52.
	<ul style="list-style-type: none"> • Final Review of Course 	Craven and Hirnle, Chapter 4
		Kerr and MacPhail, Chapter 15