



APOLYTECHNIC INSTITUTION

School of Health Sciences  
Program: Bachelor of Science in Nursing  
Option:

**NURS 3000**  
**Applied Nursing Science 3**

Part A

|                     |             |                     |               |
|---------------------|-------------|---------------------|---------------|
| <b>Start Date:</b>  | August 2009 | <b>End Date:</b>    | December 2009 |
| <b>Total Hours:</b> | 42          | <b>Total Weeks:</b> | 14            |
| <b>Hours/Week:</b>  | 3           | <b>Lecture:</b>     | 3             |
|                     |             | <b>Lab:</b>         |               |
|                     |             | <b>Shop:</b>        |               |
|                     |             | <b>Seminar:</b>     |               |
|                     |             | <b>Other:</b>       |               |

**Prerequisites**

| Course No. | Course Name                    |
|------------|--------------------------------|
| BHSC 2203  | Physiology and Pathophysiology |
| BHSC 2228  | Microbiology                   |
| ENGL 1177  | Academic Writing               |
| NURS 2000  | Applied Nursing Science 2      |
| NURS 2030  | Nursing Practicum 2            |

**NURS 3000 is a Prerequisite for:**

| Course No. | Course Name               |
|------------|---------------------------|
| NURS 4000  | Applied Nursing Science 4 |
| NURS 4032  | Nursing Practicum 4       |

■ **Course Description**

Students develop nursing knowledge, skills, attitudes, and judgments while exploring health situations in problem-based groups. Each health situation requires the development of a plan for nursing care. Nursing, growth and development, ethnicity, health promotion, health, illness, critical social theory, self-esteem, family, epidemiology, physiological stress, diversity, emotional and political context, and group process are the concepts emphasized in this course.

In their problem-based groups, students develop the processes crucial to nursing practice: professionalism, communication, systematic inquiry, professional growth, creative leadership and technology-in-practice.

Problem-based, small group learning is the format used in this course. Instructor facilitators/tutors meet with a maximum of 12 students weekly for the duration of the course. The groups work at their own pace as they identify learning issues to investigate then apply to the health situation. All health situations must be completed by the end of the course.

■ **Evaluation**

|  |             |   |
|--|-------------|---|
| Group Skills – Evaluation of every group member by each student is required at midterm and end of term — <i>A 50% grade in this component is required for course completion.</i> | 15%         | Comments: All evaluative tools must be completed to achieve credit for the course.                          |
| Teaching of researched materials.  | 20%         |   |
| Term paper and proposal  | 35%         |   |
| Oral exam  | 30%         |   |
| <b>Total</b>   | <b>100%</b> | <i>A 50% grade in the combined mark of the term paper and the oral exam is required to pass the course.</i> |

■ **Course Learning Outcomes/Competencies**

Upon successful completion, the student will be able to:

1. Develop a theoretical knowledge related to human beings with selected common experiences by:
  - Understanding the impact of illness on the individual, family, society and the health care system.
  - Predicting relationships between concepts and context
  - Sharing academic research that is relevant, current, and accurate.
  - Applying research
2. Develop partnerships with human beings by:
  - Acknowledging own and others' perspective in learning experiences.
  - Monitoring the group's ability to develop the partnership process
  - Using facilitation skills to achieve optimal group function.
  - Giving feedback to group members to facilitate achievement of mutually defined group goals.
  - Reflecting on own ability to partner with human beings and implementing learning plans to develop own ability.
  - Implementing teaching and learning principles professionally.

■ **Verification**

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

Stephanie Bailey

Authoring Instructor

May 22, 2009

Date

I verify that this course outline has been reviewed.

Selma Whiteside-Kerr

Program Head/Chief Instructor

May 22, 2009

Date

I verify that this course outline complies with BCIT policy.

Bill Dow

Dean/Associate Dean

May 25, 2009

Date

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

## Part B

### ■ Instructors

|                                  |          |     |  |
|----------------------------------|----------|-----|--|
| Stephanie Bailey (course leader) | SE12 418 | TBA | <b>E-mail Address:</b><br>available on<br>my.bcit.ca |
| Kathaleen Appleby                | SE12-418 | TBA |  |
| Ling Lai                         | SE12-418 | TBA |  |
| Kathy Quee                       | SE12-418 | TBA |  |
| Karen Driol                      |          |     |  |

### ■ Learning Resources

#### Required:

American Psychological Association. (2001). *Publication manual of the American Psychological Association* (5th ed.). Washington, DC: Author.

College of Registered Nurses of British Columbia. (2006). *Scope of practice for Registered Nurses; Standards. Limits, Conditions*. Vancouver, BC: Author.

Philosophy Task Group: (2006). *Bachelor of Science Nursing curriculum philosophy*. Burnaby, BC: British Columbia Institute of Technology.

Wong, D.L., Hockenberry, M.J., Wilson, D., Perry, S.E. & Lowdermilk, D.L. (2006). *Maternal child nursing care* (3rd ed.). St. Louis, Missouri: Mosby.

#### Generic textbooks:

1. *Code of Ethics* — Website: <http://www.crnbc.ca>
2. *Standards for Nursing Practice* — Website: <http://www.crnbc.ca>
3. Health Assessment text
4. Nursing/medical dictionary
5. A laboratory and diagnostic handbook
6. A pharmacology text
7. A medical-surgical nursing text
8. A mental health text

### ■ Information for Students

The following statements are in accordance with BCIT Student Regulations Policy 5101, BCIT Student Code of Conduct (non-academic) Policy 5102, BCIT Student Evaluation Policy 5103, and BCIT Academic Integrity and Appeals Policy 5014. To review the full policies, please refer to <http://www.bcit.ca/about/administration/policies.shtml>.

#### Assignments:

Late assignments receive a 10% per day penalty.

#### 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 course leader, 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, that the student be expelled 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 any 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 reason 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 promptly inform their course instructor(s) and the Disability Resource Centre of their personal circumstances.

■ **Process Learning Threads 3000**

**Professionalism:** -is a process that evolves throughout professional life as nurses make the client (individual, family, and community) the primary focus of nursing and commit to providing nursing service in the public interest (Bachelor of Science in Nursing Curriculum Philosophy, 2006). Students develop professionalism by actively engaging in learning partnerships with nursing students and nursing instructors. They commit to using reasoning and reflection to develop professional nursing attitudes, judgments, knowledge and skills.

Students commit to honesty, integrity, responsibility, accountability, and moral commitment consistent with the Canadian Nurses Association *Code of Ethics* for Registered Nurses (2008) as they develop optimism, comfort with uncertainty, and passion for nursing in this theory course.

Students develop their ability to practice professionally by developing a depth of nursing knowledge, considering humanistic care, making defensible nursing judgments, evaluating planned care, analyzing and applying nursing research, and analyzing contexts that promote, maintain and restore health.

**Communication:** -is a dynamic process by which embodied, verbal, written, emotional and spiritual messages are exchanged (McMaster University, 1993). Students develop professional communication by establishing shared meaning and partnership with nursing students and nursing instructors in their work groups. They also word process essays, using APA style.

Students develop partnership by believing all human beings have worth and potential and are unique. They value cooperation and commit to share the responsibility, risk, and power inherent in partnerships. They value partnership, open communication and the contributions participants bring, and they believe in the capacity of others to engage in partnership and empowerment.

Nursing partnership is developed is developed in this course:

- Students agree to partner and negotiate roles, responsibilities and actions. They use critical listening to explore group concerns, assist with self-reflection, identify capacities, and build trust in the partnership.

- Students share knowledge about health and the management of health concerns. Students use their personal power to work to pool abilities and learn from each other. Students apply teaching learning principles in their role of educator to reinforce capacity, support decision making, teach new knowledge and skills and monitor progress in achieving goals. They engage actively in decision making to gain control of their learning and increase competence, confidence and self reliance.
- Students use facilitation skills to build effective work teams, differentiate between task and process skills, and provide constructive feedback to evaluate individual and group function.

**Systematic Inquiry:** -involves the process of critical thinking, decision making and research. They access texts, databases and internet sites for information.

- To develop critical thinking, students continue to challenge assumptions, consider the importance of context, imagine alternate perspectives and begin to be reflectively skeptical (Brookfield, 1987). They engage in self-reflection and dialogue with nursing students and instructors. This reflective questioning, critical thinking and evidence search is used continually to develop approaches to health concerns. Students are increasingly independent in developing critical thinking and use a variety of theoretical perspectives to guide their thinking.
- To develop decision making, students use reasoning to make connections and judge information. They use critical thinking and academic research to consider the best possible decisions.
- To develop research ability, students initiate a diligent, systematic investigation of concepts and data relevant to the health experience presented. They critically read appropriate and relevant academic literature to expand their body of knowledge and use research studies to develop evidence.

**Professional Growth:** - is a process of self-inquiry and self-direction that facilitates learning. Students commit to professional growth. They evaluate theirs and others' performance, assess learning gaps reflect on these gaps and why they might exist, manage information to search for learning opportunities, think critically about learning options and then critically appraise the consequences of the learning options implemented. Students have the self-discipline, initiative, commitment to nursing and passion for nursing practice to engage with nursing practice and instructors to enhance their professional growth. They reflect on their personal values, beliefs and assumptions about nursing concepts, health situations and group process. They assume responsibility and accountability for their professional growth in this course.

**Creative Leadership:** - is a process that evolves throughout a nurse's professional life. Students continue to develop creative leadership that enhances and supports the creative potential within followers by nourishing a common vision and focusing activity towards the common goal. Students understand themselves so they can transcend self-interest, establish meaningful connections with nursing students and instructors, challenge the status quo, and incorporate nursing ethics into their actions. They support self-direction and risk-taking in nursing students and instructors and recognize the contributions of others.

At all levels, students develop exemplary followership (Kelly, 1992). That is, they develop the independence and initiative to think critically and challenge the leader so the best idea, strategy or goal is identified, but they are also loyal energetic supporters of the goal (Chaleff, 1998). Students know their strengths thus their unique contribution to the goal. Students develop the ability to move between exemplary followership and creative leadership roles as the situation requires.

**Technology-in practice:** - "Technology involves organization, procedures, symbols, new words, equations and ...a mindset" (Franklin, 1990, p. 12). Technology-in-practice is the ways of knowing, being and doing in health that enhances patient care. Students continue to develop an understanding of the impact of technology-in-practice on culture, socially accepted practices and values. Students recognize the impact of technology-in-practice on patients, families and health care workers.



BCIT Bachelors of Science in Nursing

# NURS 3000

## Course Syllabus

An assignment handbook for Applied Nursing Science 3

## Course Content

Students will consider the following concepts and contexts in 2 health situations. In analyzing a situation the students may identify many other relevant content areas. These will be discussed within the context of the situation as time and group interest permits.

Concepts introduced in Level 3:

- Critical Social Theory
- Self-Esteem
- Epidemiology
- Family

Contexts emphasized in Level 3:

- Emotional/Political

Topics continued in Level 3:

- Ethnicity: South Asian
- Growth and Development: Neonate, Infant, Early Childhood, Adolescence

Topics covered under the Concept of Health/Illness in Level 3:

- Fluid and Electrolytes
- Gastroenteritis
- Child Abuse
- Substance Abuse (drug)
- Hypertension in Pregnancy

**Course Work:** Students are encouraged to identify individual learning needs that may be met in this course. Please talk with the tutor to see how this might be accomplished. During the first class, the course evaluation methods will be discussed. Students will participate in a verbal and/or written review of the course at midterm and the end of the term. The review will include a discussion of teaching methods, resources, and course structure. The midterm review is to meet the needs of the students currently taking the course. The end of term review is aimed at modifying the course for subsequent students



## Assignment Descriptions

### 1. Group Skills Evaluation: 15% of total mark

#### Purpose

- To promote learning within the group
- To develop skills which are integral to teaching patients and professional groups
- To continue to improve ability to facilitate group process within own NURS 3000 group.
- To develop skills that enhance leadership ability within own nursing practice.
- To demonstrate a high level of professionalism by being accountable and responsible for maintaining group norms.

#### Guidelines

1. Each group will establish group norms in their first session. Norms will include issues such as ways to deal with lateness, missed work, assignment of topics, role and selection of chairperson, use of agenda, and other issues. Group norms may be revised at anytime if required.
2. All group members are responsible for contributing to effective group dynamics. If problems arise, then the group must decide how to resolve difficulties so work is not impaired. If any member is not adhering to the Group Norms then a discussion within the group is required so the problem can be resolved.
3. A pre-designated chairperson is responsible for posting the agenda for the current PBL session. He/she has a major role in timekeeping and facilitating group process. The chairperson is also responsible for ensuring that the agenda for the following week is developed by the group. The chairperson leads the debriefing discussion in the last 10-15 minutes of the session.

#### Policies

1. Students will evaluate their own group process skills and that of their group members on a weekly basis using the criteria described in Group Skills Evaluation Tool (Appendix B).
2. Formal written and verbal feedback will be given at midterm (formative evaluation) using the Midterm Evaluation Tool (Appendix A). Every student must provide written feedback on every group member. The format for giving and receiving feedback will be decided by the group. It is important that group members receive accurate feedback at this time so they are able to form a plan to improve any problem areas.
3. At the end of term each student will give themselves and each group member a mark for group skills using the Group Skills Evaluation Tool. The marking criteria are described on the tool. The final mark for group skills will be determined by a combination of the tutor's mark (7.5%) and an average of each student's mark (7.5%) for a total of 15%. Criteria related to attendance, lateness, and evaluation will be solely marked by the tutor. The tutor reserves the right to remove any evaluation form that is inappropriate or incomplete. **Students must achieve 50% in their Group Skills mark in order to pass the course.**

## 2. Teaching of Researched Materials: 20% of total mark

### Purpose and Guidelines

Teaching is a specific focus of NURS 3000. Each time a student teaches a researched topic, a mark will be assigned by the tutor. The student's average mark of all their teaching assignments will represent 20% of the final course mark. Students can meet with the tutor at any time during the term to discuss teaching sessions and assigned marks. The Teaching Evaluation Tool, (Appendix C) specifies the criteria for teaching researched materials.

## 3. Term Paper and Proposal: 35% of total mark

### Purpose

- To identify a health issue relevant to the student's pediatric, maternity, or mental health practicum experiences, and to review the academic literature relevant to the issue.
- To relate the health issue to a Level 3 concept {critical social theory, family, epidemiology, self-esteem, growth and development of the neonate, infant, preschool child, adolescent, or ethnicity.}
- To develop pertinent questions based on the literature which will be the basis for an interview.
- To apply research about the health issue and the concept to a real life situation by conducting a structured interview with someone who has personal experience of the issue.
- To describe how the knowledge gained about the issue, concept, and application could influence their nursing practice.
- A proposal is to be handed in before the paper so students may receive formal feedback from their instructor on their chosen topic.

Some examples of term paper topics are:

- ***Are drug addicted mothers treated unfairly by nurses?*** Critical social theory is used to explore the relationship between drug addicted new mothers and nurses. A mother from a support group is interviewed to determine if current research is applicable.
- ***Does having a premature baby affect the functioning of a family?*** A student interviews the father of premature baby to determine if current research is applicable.
- ***Is teen pregnancy an epidemic?*** Epidemiology is used to explore the topic of teen pregnancy. A community health nurse is contacted to determine if current research is applicable.
- ***Does depression cause a decrease in self-esteem?*** A student interviews an acquaintance with depression to determine if current research is applicable.

### Policies

#### Proposal: 5% of total mark

1. Provide an overview of your planned paper in a one-page proposal. Phrase your title in the form of a question. Your tutor will determine a second due date if revisions are required. Submit your proposal in a folder.
2. 10% of the value of the proposal per day will be deducted if the proposal or the revisions are late.
3. The proposal must include:
  - Title of the paper (in the form of a question).
  - A clear statement about the health issue and your perspective.
  - Clear identification of the related concept.

- A brief description of the real life situation and who you will interview. Include why this situation is relevant to the topic.
  - Statements about why the issue, concept, and application are relevant to nursing.
  - Include at least 2 references/current research studies related to the issue and at least 2 references related to the concept.
4. The proposal must follow APA style and be word processed.
  5. The proposal must be deemed satisfactory by your tutor in order to proceed in writing the paper.
  6. The original satisfactory proposal must be submitted with your paper.

#### **Term Paper: 30% of total mark**

1. The paper must conform to current APA guidelines and conventions for professional writing. If the paper is found to significantly deviate from this standard, then the paper must be rewritten before it is marked, and will be subjected to the late penalty (10% per day), which will commence on the day it is returned to the student. Therefore, the minimum penalty is 10% (10 marks lost of a possible 100).
2. **Failure to acknowledge a source once will result in a complete loss of marks related to APA format.** This occurs when another author's ideas are "passed off" as the writer's. A repeated instance will constitute a violation of the plagiarism policy.
3. The BCIT policy in relation to cheating and plagiarism is in effect. Students will submit **two copies of their paper**. One copy will be retained for the sole purpose of monitoring for plagiarism.
4. The paper must be 3500-4000 words, excluding cover page, appendix and references. Exceeding the length, will result in a one mark deduction per page.
5. **Submit to your tutor: one printed copy in a folder with your marked proposal and one electronic copy.**
6. If the paper is late, the mark will be reduced by 10% of the value of the paper per day.
7. The paper must reflect current research and a variety of resources. **The paper must have a minimum of 10 academic resources (other than dictionaries and textbooks). At least 6 pertinent academic research studies are required.** Primary sources are encouraged, but secondary sources are acceptable as long as they are critically examined and referenced correctly. Summarize the research in your own words.
8. Tutors are available for consultation well ahead of the due dates. The consultation will be by appointment and during office hours.
9. Extensions are granted on an individual basis for extenuating circumstances by the course leader. Requests for extensions must be discussed with your tutor before you contact the course leader.
10. If you interview someone outside of your clinical setting, a written consent is required (see Appendix F). Bring two copies of the consent for your volunteer to read and sign. Leave one copy with the volunteer and give the other signed copy to your tutor. Remember you also must sign both copies.

## Assignment of Marks for Paper

|       |    |  |
|-------|----|--|
| Marks |    |  |
| 5     | A. | <b>Introduction</b><br>Describe purpose of paper, health issue, related concept, application, and relevance to nursing.<br><i>Your perspective or hypothesis must be included.</i>   |
| 15    | B. | <b>Exploration of the Health Issue</b><br>Present the health issue using related research studies and relevant literature. Discuss research findings, perspectives, points of view, and issues arising from your review that support or refute your position statements. Develop the relationship between the issue and your concept.  |
| 15    | C. | <b>Exploration of the Concept</b><br>Discuss and analyze the concept to include definitions, characteristics, and perspective or points of view. Include a second theory, model, or framework to compare and/or contrast. Ensure that your discussion of the concept is relevant to the practice situation. Continue to develop the relationship of the concept to your health issue.  |
| 10    | D. | <b>Application of Research on the Health Issue and Related Concept to the Real Life Situation</b> <ul style="list-style-type: none"> <li>Set the stage and describe who you interviewed and why. Include a summary of your interview. Interview questions, responses, and some direct quotes are to be included in an appendix.</li> </ul>   |
| 20    |    | <ul style="list-style-type: none"> <li>Discuss how the research and literature you previously reviewed on the health issue and the concept are relevant to the real life situation. Explain how the literature relates, supports, or refutes issues within this situation.</li> </ul>  |
| 9     |    | <ul style="list-style-type: none"> <li>Discuss how the knowledge you have gained about the topic and the concept could influence your nursing practice. Be specific.</li> </ul>  |
| 6     | E. | <b>Conclusion</b><br>What conclusions can you draw from this paper? Was your perspective supported or not? Summarize key ideas explored and developed.   |
| 20    | F. | <b>APA Formatting and Style</b> <ol style="list-style-type: none"> <li>Reference list (3)<br/><i>At least 10 academic references (other than dictionaries and textbooks), 6 of these must be research studies</i></li> <li>Citations in text (2)</li> <li>Headings (1)</li> <li>Paragraphs (5)</li> <li>Academic voice: cohesive organization of ideas, smooth, orderly, clear, concise (5)</li> <li>Sentence structure, grammar (3)</li> <li>Spelling, punctuation (1)</li> </ol> |

#### 4. Oral Examination: 30% of total mark

- The oral problem-solving examination will be held **Week 17**. All students will be tested on the same date. A schedule of randomly assigned times for the exam will be sent to all students week 12.
- Exam questions will be reviewed at the end of **each** PBL situation. This will provide you opportunity to practice the questions and review your responses with the tutor.
- Examination questions are listed in Appendix D and the marking format is in Appendix E.

#### Examination Procedure

##### Step 1:

- At their assigned time, students will pick up an exam package which includes: directions for the exam, a pediatric or postpartum scenario, a list of the exam questions (Appendix D), an exam booklet, and a room number. Students will then have two hours to research the questions and to hand write answers to the 4 questions into the exam booklet. **This is intended to be an individual exercise. Any discussion or sharing of exam content will be considered cheating and dealt with as such.**
- All answers must be in the students' own words. Students may be asked by the examiner to rephrase answers for clarity. Students may refer only to the written answers in their exam book during the exam. No other reference materials are to be used during the oral portion of the exam.

##### Step 2:

- Go to your assigned room, the tutor will invite you in at your scheduled time. The tutor will ask you to answer the 4 questions in order.
- The oral part will take 30 minutes. The tutor **will not** prompt you. The tutor will not give you any assistance with answering the questions.
- The tutor will use a marking scheme (Appendix E) while you are answering the questions.
- The written situation and working papers are returned to the tutor at the end of the oral exam.

**Appendix A**

**Student:**  
**Evaluator:**

**Midterm Group Skill Evaluation Tool**  
**NURS 3000**

*Provide written feedback based on the group skills criteria listed in Appendix B, Group Skills Evaluation Tool.*

**Areas of Strength:**

**Areas for Development:**

## Appendix B

### Group Skills Evaluation Tool

#### Part 1

**Purpose:** This tool is designed to provide accurate information to help improve group process skills. The form is also used to assign a final mark.

**Instructions:** Assign a mark to yourself and each group member for each criterion using the following scale.

| 3 Marks  | 2 Marks  | 1 Mark   | 0 Marks   |
|--|--|--|---|
| <b>Strongly agree</b><br><br>Exceeds criteria consistently | <b>Agree</b><br><br>Meets criteria fairly consistently | <b>Disagree</b><br><br>Needs improvement to meet criteria or meets criteria inconsistently | <b>Strongly Disagree</b><br><br>Fails to meet criteria or rarely meets criteria |

**The student contributes to group effectiveness by:**

1. giving and seeking information and opinions on own initiative
2. clarifying and summarizing information, ideas, or suggestions
3. actively participating in planning learning, analyzing learning issues and assigning topics
4. giving effective feedback to individuals concerning group skills that may require improvement
5. giving effective feedback about strengths and areas to improve on related to research and teaching
6. identifying positive attributes of the group
7. identifying conflict within the group and suggesting solutions
8. suggesting ways to resolve problems the group may have in completing tasks

Marks: /24

**The student demonstrates effective group facilitation and leadership by:**

9. chairing the meeting effectively
10. helping to keep all group members focused and active
11. maintaining a positive, goal directed attitude and conveying interest and enthusiasm

/9

**The student demonstrates professionalism and knowledge by:**

12. being accountable and responsible e.g. carrying a full share of workload
13. accepting feedback in an open manner
14. being courteous and respectful of others (includes notifying appropriate person if late, ill, etc.)
15. being willing to compromise when conflicts arise
16. attempting to understand the viewpoint of others
17. listening attentively
18. self-evaluating own growth as a group member, facilitator, and teacher
19. seeking to understand how context influences a problem or situation
20. applying knowledge of content to the health care situation at an appropriate level of depth and breadth

/27

-----  
/60

**Part 2: The following is marked by your tutor:**

21. Is always punctual
22. Completes Group Skills Evaluation for self completely and appropriately
23. Completes the Group Skills Evaluation for each group member completely and appropriately

/30

/90

**Appendix C****TEACHING EVALUATION TOOL**

Student: \_\_\_\_\_ Tutor: \_\_\_\_\_

Your tutor will assign each specified criteria a point from one to five. One is low achievement of the criteria and five represents high achievement of the criteria.

|              |  |  |  |  |
|--------------|--|--|--|--|
| <b>Date</b>  |  |  |  |  |
| <b>Topic</b> |  |  |  |  |

**EVALUATION CRITERIA****PLANNING (25)**

|  |  |  |  |  |
|--|--|--|--|--|
| Presentation is on topic, relevant, current, accurate, and defensible.   |  |  |  |  |
| A wide variety of resources used (at least five resources).  |  |  |  |  |
| Relevant, current, defensible, appropriate academic research is included in presentation.                                  |  |  |  |  |
| Assessed the learning needs of the group.  |  |  |  |  |
| Appropriate pre-reading was distributed to the group prior to the presentation and incorporated into the teaching session. |  |  |  |  |

**IMPLEMENTATION (65)**

|  |  |  |  |  |
|--|--|--|--|--|
| Establishes an environment conducive to learning.  |  |  |  |  |
| Introduces the topic and relates to an immediate need, problem, or deficit. It has meaning to the student. |  |  |  |  |
| Learning goals are clear.  |  |  |  |  |
| Relates new material to previous knowledge.  |  |  |  |  |
| Applies material to the health situation.  |  |  |  |  |
| Demonstrates a solid knowledge of the material presented and understanding of the research.                |  |  |  |  |
| Teaching strategies enhance learning.<br>Teaching aids are clear and organized.                            |  |  |  |  |



|   |  |  |  |  |
|---|--|--|--|--|
| Explains how Level 3 concepts apply to this topic. Used 5 specific examples   |  |  |  |  |
| Relates material to the practice of nursing   |  |  |  |  |
| Uses strategies to get group members involved (asks critical thinking questions). Stimulates discussion. Energizes group. |  |  |  |  |
| Deals effectively with questions or issues raised by the group.   |  |  |  |  |
| Summarizes the main points.   |  |  |  |  |
| Speaks in a confident, articulate manner.   |  |  |  |  |

### EVALUATION (10)

|   |  |  |  |  |
|---|--|--|--|--|
| Evaluates immediately following the teaching session and identifies strengths and areas to work on.                                     |  |  |  |  |
| Discusses teaching strategies and rationale for use with topic. Examines principles of teaching and learning utilized. (see Appendix G) |  |  |  |  |

|              |            |            |            |            |
|--------------|------------|------------|------------|------------|
| <b>Total</b> | <u>100</u> | <u>100</u> | <u>100</u> | <u>100</u> |
|--------------|------------|------------|------------|------------|

**Average**

**Final Grade**

20

**Comments:**

## Appendix D

### ORAL EXAMINATION QUESTIONS NURS 3000

1. Describe the pertinent physiology or underlying pathophysiology related to the patient's condition at this time. If your patient situation involves childbirth, be prepared to discuss the mother's physiological (pathophysiological) changes related to the **postpartum period**. Changes, signs and symptoms without the underlying patho/physiology will be given no marks.
2.
  - A. Identify and list the 5 priority problems in this situation. Priority problems may be actual or potential and must relate directly to the patient and/or family.
  - B. From the list above choose the 3 most important problems. Explain and justify why these 3 problems are priorities.
  - C. Develop care plans for your 3 priority problems. For each problem include a clear problem statement, 5 interventions, and a rationale for each intervention. Interventions must directly relate to the identified problem, every rationale must include underlying physiology and/or pathophysiology
3.
  - A. Discuss an assumption you have made in this situation. How would you validate your assumption?
  - B. How could your assumption impact your nursing care if it was TRUE?
  - C. How could your assumption impact your nursing care if it was FALSE?
4.
  - A. Choose *one* of the following concepts: epidemiology, critical social theory, self-esteem, growth and development theory for neonate, infant, preschool or adolescence. Describe the definitions and characteristics of the concept using 2 theorists or models.
  - B. Describe, using 5 specific examples how the concept applies in this situation.

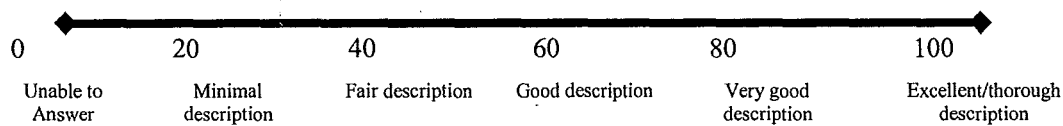
## Appendix E

### N3000 ORAL EXAMINATION MARKING TOOL

Students are to answer the questions in their own words. During the exam they may refer only to the hand written answers in their exam booklet.

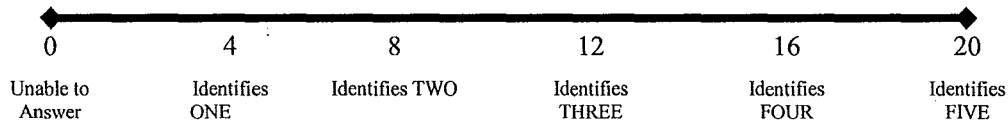
#### QUESTION 1:

Describe the pertinent physiology or underlying pathophysiology related to the patient's condition(s) at this time. If your patient situation involves childbirth, be prepared to discuss the physiological (pathophysiological) changes related to the **postpartum period**. Changes, and/or signs and symptoms without the underlying physiology or pathophysiology will be given no marks.

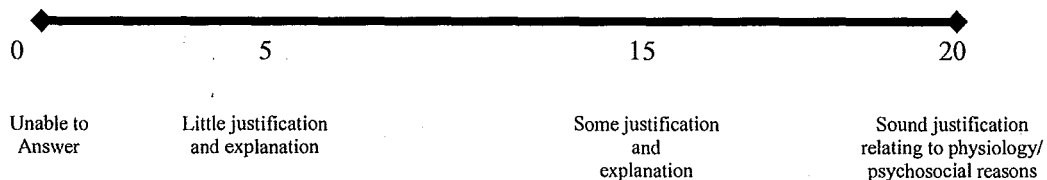


#### QUESTION 2:

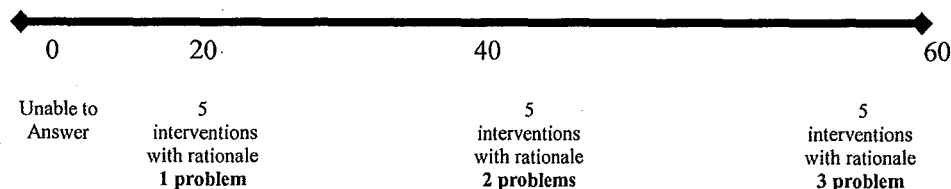
- A. Identify the **5 priority** problems in this situation. Priority problems may be actual or potential and must directly relate to the patient and/or family.



- B. From the list above choose the **3** most important problems. Explain and justify why these **3** problems are priorities.

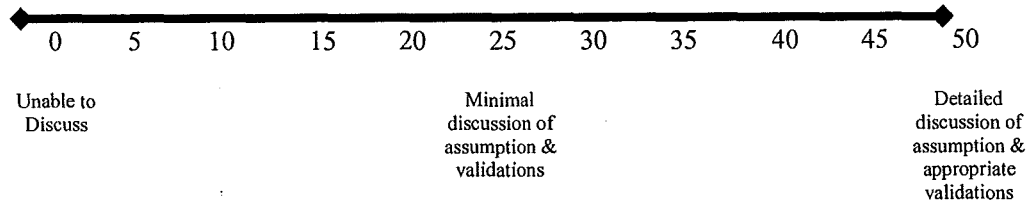


- C. Develop care plans for your 3 priority problems. For each problem include a clear problem statement, 5 interventions, and a rationale for each intervention. Interventions must directly relate to the identified problem, every rationale must include underlying physiology and/or pathophysiology.

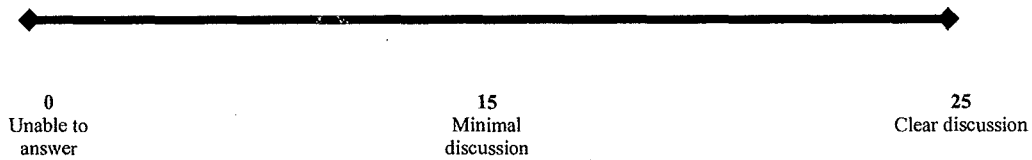


**QUESTION 3:**

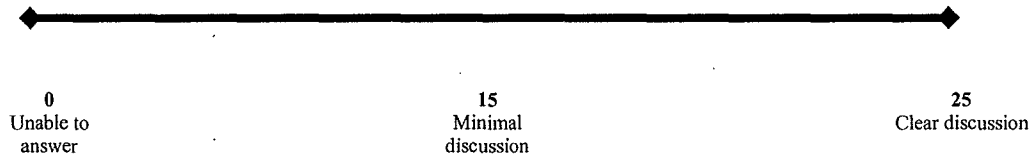
- A. Discuss an assumption you have made in this situation. How would you validate your assumption?



- B. How could these assumptions impact your nursing care if they were TRUE?

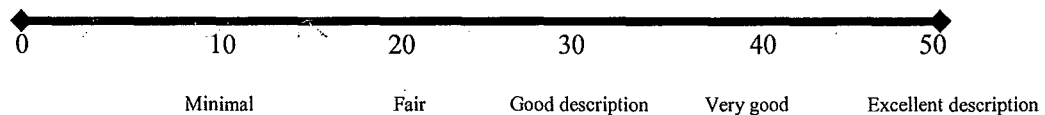


- C. How could these assumptions impact your nursing care if they were FALSE?

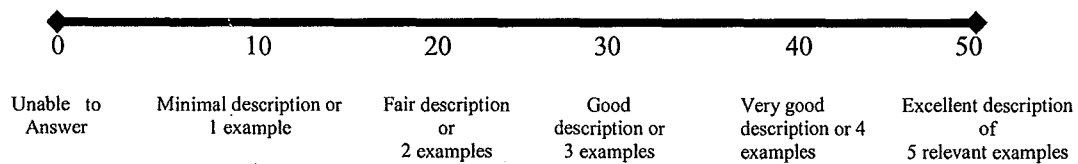


**QUESTION 4:**

- A. Choose 1 of the following concepts: epidemiology, critical social theory, self-esteem, growth and development theory for neonate, infant, preschool or adolescence. Describe the definitions and characteristics of the concept using 2 theorists or models.



- B. Describe, using 5 specific examples, how the concept applies in this situation.



## **Appendix F**

### **British Columbia Institute of Technology School of Nursing Consent for Interview**

In signing this document, I am giving my consent to be interviewed by a BCIT nursing student enrolled in NURS 3000, Applied Nursing Science 3. The student will ask me questions about my experiences surrounding a nursing issue that relates to pediatric, maternity or mental health nursing. I may be asked further questions about one of the following subjects: family, critical social theory, epidemiology, self-esteem, growth and development or diversity. The interview will take no longer than 2 hours. I have received a copy of this consent.

The purpose of this interview is to provide the student with the opportunity to apply published research about a nursing issue and related concept to a real life situation. My participation will help the student understand my personal experience and could benefit his or her future nursing practice. I understand that the student has been instructed not to offer advice on matters beyond basic health promotion and illness prevention.

The student will take notes during the interview and may, with my consent audio-tape my responses.

This interview was granted freely. I have been informed the interview is entirely voluntary, and that even after the interview begins I can refuse to answer any specific questions or decide to terminate the interview at any point. Any information I share will be strictly confidential. I will not be identified in any way in the student's written assignment.

I understand that Karen Driol, a nursing instructor at BCIT is the person to contact if I have any questions about the interview or my rights as a participant. Ms Driol may be contacted at 604-451-6946.

Date:

Signature of volunteer being interviewed:

Signature of student conducting the interview

## Appendix G

### Adult Teaching and Learning Principles<sup>1</sup>

1. The learner is able to participate actively in the learning process
2. New material draws on past experiences and is related to something the learner already knows.
3. The nature of the learning activity changes frequently.
4. There is an introduction of what you will teach.
5. A clear learning goal is stated.
6. The main points are summarized at the conclusion of the teaching session.
7. Material taught should relate to an immediate need, problem or deficit of the learner.
8. Assessment of learning needs is done.
9. All learning is voluntary.
10. Learning is person-centered and problem centered.
11. Learning is self-controlled and self-directed.
12. The threat to oneself is reduced to a minimum in the educational process.
13. Teaching and learning should be enjoyable and rewarding.
14. Learning is reinforced by application and prompt feedback.
15. Positive reinforcement is an important motivation for success.

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<sup>1</sup> Cross, K.P. (1981). *Adults as Learners*. San Francisco: Jossey-Blass



BRITISH COLUMBIA  
INSTITUTE OF TECHNOLOGY

## school of health sciences

### key contacts

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All program information is on this Web site. If you require further information, or would like to meet with a Program Advisor, please phone 604-434-1610. You can also e-mail your question(s) to **Ask an Advisor**.

British Columbia Institute of Technology  
3700 Willingdon Avenue, Burnaby, British Columbia, Canada, V5G 3H2, 604-434-5734  
[www.bcit.ca](http://www.bcit.ca)

BRITISH COLUMBIA  
INSTITUTE OF TECHNOLOGY

## **school of health**

### **simulation lab**

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The School of Health Sciences Nursing Simulation Lab is a place where students can experience authentic and complex clinical scenarios in a safe learner centered environment. Students have the opportunity to develop their roles as health care professionals through the use of scenarios that build on their learning in the classroom and the hospital. With instructor supervision and facilitation, students communicate, assess and provide interventions to human patient simulators.

**[Click here for a 360° Virtual Tour](#)**

### **Human Patient Simulators**

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Human Patient Simulators are computerized full sized anatomically correct mannequins. These state of the art simulators mimic "real patients" allowing students to complete full assessments along with interventions. The simulators are not simply mannequins – they have hearts that beat, lungs that breath and they even bleed, cry and talk.

### **Benefits for Students**

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Simulation experiences help students develop nursing knowledge, skills, attitudes and judgements in real time 'clinical' simulations. Every student is given the opportunity to participate in a number of essential "clinical" scenarios throughout the course of the nursing program. Simulation supports students by:

- Preparing learners for professional practice by:
  - Realistically integrating knowledge and practice
  - Incorporating reflection on practice in debriefing
  - Promoting interdisciplinary healthcare
  - Providing an environment where it is safe to make mistakes
- Developing leadership in learners
- Developing student's application of skills, critical thinking, and decision making through 'acute' simulation scenarios
- Using evidence based research to advance 'best' practice



### **Simulation Scenarios**

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#### **Prepare**

Prior to the actual simulation experiences, students are given the learning objectives and patient data for the simulation scenarios.



## Apply

Scenarios run from 20 minutes to 1 hour giving students time to assess, determine patient problems, plan, implement interventions and evaluate their effectiveness.



## Reflect

Structured debriefing occurs immediately after the scenario in order to help the students connect the experience with the theory they already have and make sense of what happened.

## Simulation Roles

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### Students

During simulation scenarios, students will work together. Teamwork is encouraged. Each student will be given a role at the beginning of the scenario:

1. Primary Nurse
2. Secondary Nurse/ Medication Nurse/ Procedure Nurse
3. Documenter
4. Patient
5. Family member
6. Doctor
7. Instructor



### Faculty

Instructors partner with the students and act as facilitators and guides in the learning process.

## Simulation Lab Guidelines

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- Lab participants should dress for the clinical environment
- Simulated patients (human patient simulators) will be treated with dignity and respect
- No pens allowed in the simulation labs as ink permanently marks the mannequins
- Professionalism is an expectation
- Simulation is a formative learning experience
- Simulation experience is learner driven

British Columbia Institute of Technology  
3700 Willingdon Avenue, Burnaby, British Columbia, Canada, V5G 3H2, 604-434-5734  
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