



A POLYTECHNIC INSTITUTION

School of Health Sciences

Program: Bachelor of Science in Nursing

Option:

**NURS 3033**  
**Family Nursing Theory**

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<b>Start Date:</b>	August, 2006	<b>End Date:</b>	December, 2006
<b>Total Hours:</b>	27	<b>Total Weeks:</b>	9
<b>Hours/Week:</b>	3	<b>Lecture:</b>	1
		<b>Lab:</b>	
		<b>Term/Level:</b>	3
		<b>Course Credits:</b>	2
		<b>Shop:</b>	
		<b>Seminar:</b>	2
		<b>Other:</b>	home visit

**Prerequisites**

Course No.	Course Name
NURS 1050	Interpersonal Communication
NURS 2000	Applied Nursing Science 2
NURS 2030	Nursing Practicum 2
PSYC 1101	Introductory Psychology 1
(or Sociology credit)	

**NURS 3033 is a Prerequisite for:**

Course No.	Course Name
NURS 4032	Nursing Practicum 4

**NURS 3033 is a Corequisite for:**

Course No.	Course Name
NURS 3034	Family Practicum

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**■ Course Description**

The process of promoting the health of individual and families is integral to professional nursing practice. This course provides a philosophical and theoretical foundation for understanding family health issues and offers processes and strategies that can enhance nursing responsiveness to families and support the promotion of health and healing.

**■ Detailed Course Description**

The course will introduce a process students will use to develop a conscious, intentional and responsive nursing practice with families. The course facilitates knowledge development, critical thinking skills, and reflective and relational practice through course readings, small group discussions and reflection in and on practice.

**■ Evaluation**

Marks are derived from the following:

Seminar Participation	25%
Midterm	25%
Reviews of Reflexive/Relational Practice with families in community and acute care settings	50%
<b>TOTAL</b>	<b>100%</b>

**Comments:** A final grade of 50% or higher is required for successful completion of the course. All assignments must be completed to achieve a passing grade.

## ■ Course Learning Outcomes/Competencies

At the end of this course the student will be able to:

1. Develop philosophical and theoretical knowledge that informs:
  - Identification of family health issues
  - Analysis of family health issues
  - Responsive nursing practice with families
2. Consider usefulness of various theoretical perspectives to development of ethical, health promoting nursing practice with families.
3. Analyze personal habits of knowing and responding to families
4. Select a theoretical perspective to intentionally develop additional ways of knowing and responding to families
5. Analyze significance of context to relational nursing practice with families.
6. Cultivate the skills of reflexivity.
7. Enhance spontaneous relational capacities that empower families.

## ■ Learning Process Threads

**Professionalism:** Students further develop an understanding of the professional nurse's role. They develop a nursing knowledge base that is required for safe practice and to analyze contextual influences. Students consider theoretical perspectives relevant to family issues. Students actively engage in dialogue, personal reflection and critical thinking to develop a conscious, intentional, and responsive nursing practice with families to promote family health and healing. Students develop appreciation for contextual influences on the family, family health and capacity for relational nursing practice. They begin to consider the impact of health and illness on the family and the influence of family on health and illness.

Students incorporate professional presentation into their interactions with families in clinical and home settings. Students make the family their primary focus and start to develop comfort with uncertainty. They analyze their relational capacity and their skills of reflexivity as they engage with families. Analysis of reflexivity includes consideration of ethical principles. Students will use learning skills and attitudes to reap greatest benefit from this course.

**Communication:** Students critically discuss verbally and in writing. They use relevant research and literature to gain a broad perspective on family issues. They dialogue with colleagues and teachers in the process of learning. Students establish relationships with families based on shared meaning and partnership. They begin to be in-relation with families in a responsive and health promoting manner. Students will use a spiritual lens through which to know families. They cultivate skills of reflexivity and relational capacity.

**Systematic Inquiry:** Students are increasingly independent with critical thinking and use a variety of sources of knowing to guide care. They use a variety of philosophical and theoretical perspectives to guide their thinking. They challenge assumptions, consider the importance of context and imagine alternate perspectives. They learn a

■ Learning Process Threads (cont'd.)

process that includes empirical, relational and reflexive inquiry to reconcile practice that lacks definitive answers. They use a reasoning process to make connections and judge information.

**Professional Growth:** Course activities and assignments help students develop self knowledge and critically think about their experiences to develop personal meaning. Students take responsibility for their learning and for their preparation for class work. They critically read course materials and reflect on their knowledge, skills, attitudes and beliefs about family and working with family. They share knowledge and experiences with colleagues. They thoughtfully critique their group's function. They are responsible and accountable for their actions and are becoming committed to professional growth.

**Creative Leadership:** Students' experience with family visits broadens their understanding of the continuum of care. They appreciate the complex role of nurses as they work with families in the health care system. Students explore family issues. They work to develop self knowledge to transcend self interest. They establish meaningful and genuine connections with stakeholders, challenge the status quo, incorporate nursing ethics into practice, support self-direction and risk-taking, and recognize the contributions of others.

**Technology-in-Practice:** Students develop their relational capacity: their ways of knowing, being, and doing as they engage with families.

■ Verification

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

Dorothy Cennig  
Authoring Instructor

June 22/06  
Date

I verify that this course outline has been reviewed.

M. White  
Program Head/Chief Instructor

June 22/06  
Date

I verify that this course outline complies with BCIT policy.

Freeman  
Dean/Associate Dean

June 22/06  
Date

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

■ **Instructor(s)**

Dorothy Cumming  
(Course Leader)

Office Location: SW12-Pod H  
Office Hrs.: By appointment  
Monday,  
Thursday\* and  
Friday

Office Phone: 604-456-8116  
E-mail Address: dcumming5@my.bcit.ca

Please note, due to limited time available on Mondays related to your class schedule and my departmental meetings, no time available on Tuesday and Wednesday related to clinical days for you and me, Thursday must be considered for office appointments; Thursday is a non-scheduled day intended for such use. Friday afternoons are also available for office appointments.

■ **Learning Resources**

*Required Text:*

Hartrick Doane, G., & Varcoe, C. (2005). *Family nursing as relational inquiry: Developing health-promoting practice*. Philadelphia: Lippincott, William & Wilkins.

*Required Readings:*

See weekly schedule of required text readings.

Additional required readings may be announced.

*Recommended Books:*

Fadiman, A. (1997). *The spirit catches you and you fall down*. New York: Farrar, Strauss & Giroux.

Wright, L. M., Watson, W. L., & Bell, J. M. (1996). *Beliefs: The heart of healing in families and illness*. New York: Basic Books.

*Traditional Family Nursing/Family Health Texts available in the library:*

Bomar, P. J. (2004). *Promoting health in families: Applying family research and theory to nursing practice* (3<sup>rd</sup> ed.). Philadelphia: Saunders.

Denham, S. (2003). *Family health: A framework for nursing*. Philadelphia: F.A. Davis.

Friedman, M., Bowden, B.R., & Jones, E.G. (2003). *Family nursing: Theory and practice* (5th ed.). Upper Saddle River, NJ: Prentice Hall.

Spector, R.E. (2004). *Cultural diversity in health and illness* (6th ed.). New Jersey: Prentice Hall.

Wright, L. M., & Leahey, M. (2005). *Nurses and families: A guide to family assessment and intervention* (3<sup>rd</sup> ed.). Philadelphia: F.A. Davies.

## ■ Information for Students

**Assignments:** Late assignments will be deducted 10% per day. Assignments will be done both on an individual basis and in pairs as specified in the assignment guides. Assignments must be word processed (where applicable) and be completed to achieve a mark for the course.

**Makeup Tests, Exams or Quizzes:** There will be **no** makeup tests, exams or quizzes. If you miss a test, exam or quiz, you will receive zero marks. Exceptions may be made for **documented** medical reasons or extenuating circumstances. In such a case, it is the responsibility of the student to inform the instructor **immediately**.

**Ethics:** BCIT assumes that all students attending the Institute will follow a high standard of ethics. Incidents of cheating or plagiarism may, therefore, result in a grade of zero for the assignment, quiz, test, exam or project for all parties involved and/or expulsion from the course.

**Attendance:** The attendance policy as outlined in the current BCIT Calendar will be enforced. Attendance will be taken at the beginning of each session. Students not present at that time will be recorded as absent. Students absent for more than 10% of the planned activities may be prohibited from completing the course.

**Illness:** A doctor's note is required for any illness causing you to miss assignments, quizzes, tests, projects or exams. At the discretion of the instructor, you may complete the work missed or have the work prorated.

**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".

**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.

**Community Visits:** Students are required to adhere to the BCIT Policy on Conduct and Appearance outlined in the BCIT Full-time Calendar. For the purpose of community visits, students will be required to wear BCIT photo ID and follow BCIT policies for dress and appearance. Refer to BCIT Nursing Program Student Guidelines, Policies and Procedures at <http://www.bcit.ca/health/nursing/>

## ■ Course Process

In this program learning and teaching are considered a shared responsibility. The instructor's role is to guide, facilitate and support your learning; your responsibility is to use the resources to prepare and to actively engage in dialogue and reflective, critical thought. The readings and learning activities will help you develop a philosophical and theoretical foundation for understanding family health issues, multiple ways of knowing family, and processes to enhance responsiveness to families and support the promotion of family health and healing. The knowledge and processes develop sequentially and require consistent weekly individual preparation for class, active participation in small group work during class, practice in practice, and reflection in and on practice. Your commitment and active participation in these learning activities are critical to your own learning as well as to the learning of your colleagues. Therefore, attendance at class is expected; please refer to attendance policy

We meet every Friday for 3 hours. The course is described as having one lecture hour and two seminar hours. Lectures are rarely used; I will offer some presentation of material and invite some full class participation in a variety of activities. You will do lots of small group work.

The course is foundational for work with families for the remainder of the program and in particular during the family- and community-focused level 6 and 7 practica; the text will be required in the upper levels.

#### Course Evaluation

Students have the right and the responsibility to evaluate the course. Ongoing feedback will be obtained from students who are currently in the course so student achievement of course outcomes can be facilitated. During the final class students will be asked to complete a written course evaluation; this data is valued and used to determine course revisions.

#### ■ Student Evaluation – three components: (Pay careful attention to due dates/exam date)

- 1) Evaluation of Student Participation in Seminar has a combined value of **25% of course grade and is based on:**
  - Group participation evaluation at midterm and final class – 10%; see form below for details. Completed class 4 and 8(**Due Sept. 8/Nov 3 and Oct 6/Dec 1**)
  - Submission of one article (see text, chapter 4, “Try it Out 4.1” for details) retrieved from the professional nursing literature – 5%; **NO written critique required; you will bring the hard copy article to class #5 – Sept 15/Nov 10**
  - Submission of any two weekly knowing/being/doing reviews (from weekly homework) that support your Clinical Practice Reflection – 10%; **submit attached to Clinical Practice Reflection that is due last class – Oct 6/ Dec 1**
- 2) Midterm Exam –multiple choice questions, 30 minutes in class for **25% course grade Sept 8/Nov 3**. The exam will test knowledge of content Ch 1, 2 and part of Chapter 3 (pp 89-103)– Ways of knowing and Paterson and Zderad’s Humanistic Nursing Theory.
- 3) Review or Reflexive/Relational Practice with Families in Community and acute care settings – **combined value of 50% of course grade:**
  - Visit to a family in the family home done in student pairs and paper marked as one paper; one student will work alone by choice or lottery in classes having an odd number of students. – **30% due Monday Sept 18/Tues Nov 14 @ 0830 in instructor’s mailbox.** (See attached Home Visit Assignment for details)
  - Written reflection of nursing practice with one family in any one of last three weeks of clinical practice (Week 6, 7 or 8/14,15 or 16). – **20% due Friday Oct 6/Dec 1 @ 0830 in class.** (See attached Clinical Practice Reflection Assignment for details)

■ **Assignments**

**NURS 3033: Family Nursing Theory  
Group Participation Evaluation Criteria**

<b>Criteria</b> (2 marks each)	<b>Evaluation #1</b>	<b>Evaluation #2</b>
Participates actively during small group discussions.		
Promotes effective group functioning.		
Brings assigned written weekly homework (e.g. Try It Out, Chapter Highlights, and This Week in Practice etc.) to the group for discussion and critique.		
Critiques intentional development of additional way of knowing using selected "lens" – spiritual, phenomenological or critical)		
Gives and receives constructive feedback.		
<b>Total</b>		<b>/10</b>

Each student will complete a Group Participation Evaluation for each student in their group for class 4 and class 8. Week 4 marks will be considered feedback only. The instructor will consider the group participation evaluations submitted by the group and the student week 8 when determining each student's participation mark.

Two marks should be awarded for meeting each criterion. No marks should be awarded if a criterion is not met.

Once a student has read all the evaluations from their group members the Group Participation Evaluation Forms will be submitted to the instructor.

Student being evaluated: \_\_\_\_\_

Student: Evaluating: \_\_\_\_\_

### **Assignments (cont'd)**

- 2) Submission of one article (see text, chapter 4, "Try it Out 4.1" for details) retrieved from the professional nursing literature. You may wish to research a family health issue relevant to an assigned family to combine clinical research with this assignment.
- 3) Review of Reflexive/Relational Practice with Families in Community and acute care settings. Part A and Part B

### **Part A: Home Visit**

#### **There are three purposes to the home visit:**

- o To engage in conversation with members of a family to learn about your selected family
- o To engage in a process of knowing "self" in relation to a particular family
- o To use a phenomenological, critical or spiritual lens through which to view the family narrative.

#### **Process for Working in Pairs:**

Students will work in pairs; if class size is uneven a student may volunteer to work alone with the family but may invite a pair to have reflective dialogue re what he/she learned about him/her self. If there are no volunteers a name will be drawn at random.

Student pairs will determine their process for preparing for the family visit and writing the paper. Student pairs will receive one grade for the paper.

Each pair will find a family willing to have such a conversation. The family will give informed consent to participate in a student nurse-family conversation.

The conversation should last 60-90 minutes and take place in the family home at a time mutually convenient to students and family. The conversation should be taped if the family will consent to taping. Families should be informed that you will not be able to remember everything the family members say. Taping allows you to engage in the conversation and not spend time writing things down. If the family will not consent to taping, students will need to take notes during the conversation.

#### **In your paper you will answer the following questions:**

- 1) What did we learn about our selected family?
- 2) What did we each learn about ourselves in relation to this family?
- 3) What did we learn about using a phenomenological, critical, or spiritual lens (in the moment or with hindsight) through which to view the family narrative?

Describe what you learned about your selected family including who is considered "family", what the family says characterizes/defines/describes them as a family, and what perspectives the family holds about "health", "family health", or "family well being." Remember family members may differ in their definitions, descriptions and perspectives.

Describe what you learned about yourself as a result of engaging with this family and hearing their narratives. Include a description of your "way of being" with this family and offer some analysis regarding how your 'self' influenced your engagement with this family:



Describe attempts to use a phenomenological, critical or spiritual lens as a way of viewing this family's narrative during or following the conversation. How did use of a spiritual lens (in the moment or with hindsight) cue you to listen for aspects related to the *spirit*, cue you to hear what *in-spires* this family? How did use of a phenomenological lens (in the moment or with hindsight) compel you to *know* more about the living experience of this particular family at this particular time? How did the phenomenological lens cue you to listen for what is meaningful to this family? How did use of a critical theory lens (in the moment or with hindsight) draw attention to sociocontextual factors that shape this family's life?

### Evaluation Criteria:

What you learned about your family. 15 marks (30%)

- Marks will be awarded for a thoughtful description of knowledge of the family (including required elements) gained through the conversation.

What you learned about yourself. 15 marks (30%)

- Marks will be awarded for thoughtful analysis of what each student learned about self in relation to the family

What you learned about use of a particular lens. 10 marks (20%)

- Marks awarded for thoughtful, appropriate analysis that indicates conceptual understanding of the selected lens and its intended use.

APA style 10 marks (20%)

- Marks will be awarded for adherence to the APA Style Guide for scholarly writing and mechanics. Scholarly writing style requires economy of expression, clarity and precision and appropriate and accurate citations and references.
- The paper **must not exceed 6 pages** excluding title page, references.
- Late papers will be deducted 10% per day.

### Important condition:

Papers that do not meet an acceptable level of clarity (flow of ideas and meaning is readily apparent) will be returned with the opportunity to rewrite before it is marked and will be subjected to the late penalty of 10% per day commencing the day it is returned to the student.

### Criteria for Choosing a Family

1. Students are responsible for finding a stable\* family willing to allow the students to have a conversation with them in their home. The students will engage in an open conversation that invites the family to say who they are, define and describe themselves, and offer their perspectives on health and family health/wellbeing. The goal is to converse with as many members of the family as possible.

\*Stable refers to families whose health status is consistent and not fluctuating rapidly.

2. Students may not select
  - a. personal friends
  - b. family members
  - c. families solicited from the clinical setting.

Suggestions for finding appropriate families will be discussed in class.

3. Students must clearly explain the purpose of the visit to the family and written consent must be obtained. Consent forms will be provided by the course instructor and must be returned prior to or at the same time as the Home visit Assignment is due. The consent form should be **placed in a sealed envelope and submitted directly to the instructor.**
4. Students will maintain confidentiality about the family. Actual surnames **will not** be used in written assignments. Written family information is restricted to the student and the course instructor.
5. The course instructor may choose to contact participating families for the purpose of obtaining feedback about the student visit.

## Part B: Clinical Practice Reflection Assignment

**This assignment is intended for self-reflection on application of course content in clinical practice in the latter weeks of the course.** Your reflection will offer clear evidence of

- o newly acquired and valued self knowledge
- o consideration of usefulness of one philosophical/theoretical perspective
- o cultivation of relational skills/processes

You may choose to offer such evidence reflecting on one or more clinical situations. You can develop the written paper as works best for you. Some may describe the situation then offer an analysis; others may describe and analyze along the way. Whatever you do make sure you *analyze* – see the criteria below.

You will **append two assigned reflections from weeks 5/6** (“This week in Practice”, “Try It Out” or “Chapter Highlights”) that offer additional evidence of your development of self knowledge, cultivation of relational skills/processes or application of philosophical/theoretical perspectives.

**Length: 4 pages excluding title page and appendices**

### Evaluation Criteria:

- o Includes description of self knowledge newly acquired and reason for valuing this knowledge (5 marks)
- o Considers how the perspective did or did not guide responsive, ethical, health promoting nursing practice with a particular family. (5 marks)
- o Identifies relational skills/processes used (consciously/intentionally or realized after the fact) and thoughtfully analyzes present skill level (5 marks)
- o Includes two relevant “homework reflections” from weeks 5/6 (10 marks)
- o This is not an APA paper in that you **do not need to**
  - cite text material referred to in your analysis (**no quotations or long descriptions of text material – the emphasis is on your thinking, feeling and doing in practice**)
  - include references

However, **you must**

- Include a title page, use usual margin settings, paragraph indentation and so forth
- Submit a paper with an acceptable level of clarity (flow of ideas and meaning is readily apparent). Marks will be awarded for clarity, precision and economy of expression. (5 marks). **Important:** Papers failing to meet a *satisfactory* level of clarity (flow of ideas and meaning is easily apparent) will be returned with a mark of zero.

### Nurs 3033 Weekly Schedule

Class #1 August 18 / October 13, 2006		
Topic	Student Preparation Before class	Student activity for "This week in practice" FOLLOWING CLASS i.e. the set of clinical days after this class
<p>Introduction to the course and one another. Review of course outline ensuring weekly schedule is understood and assignments are introduced.</p> <p><b>Why a relational approach to family nursing?</b> Cartesian/pragmatic view of knowledge Habits of knowing Socioenvironmental perspective for nursing practice</p>	<p>Read the entire course outline carefully; identify need for clarification. Read Ch. 1 of text. Consider the questions asked in "assumptions" pp.7-9; be ready to work in class with your prepared responses- you may choose to make some brief notes</p> <p>Briefly respond in legible writing or word process: Try It Out 1.1 – 1, 2 and 4 Try it Out 1.2 (no need to use 3 pages as specified in text)</p>	<p>Before next clinical days re-read "This Week in Practice on p. 38; if it helps you to remember write the questions on a card to have in your scrub pocket and consider the questions over the course of clinical. Write brief responses for next class.</p>

Class #2 August 25 / October 20, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>What is family? Literal – family as entity Borrowed Theories 1)Structural-Functional 2)Developmental 3)Systems</p> <p>"family as a complex relational experience"</p> <p>Relational view of Family health Relational nursing practice with families 3 lenses: Hermeneutic phenomenological; critical and spiritual Family as . . . experience</p>	<p>Ensure "This week in Practice" work is complete (column 3 previous week)</p> <p>Read ch.2 of text. Respond in writing to the 3 questions in Chapter Highlights</p>	<p>Complete "This week in practice" exercise paragraph one and two; write responses. If you cannot have a conversation with someone with similar <b>and</b> someone with different experience of family then try to have a conversation with one. Perhaps you can have such a conversation with a patient or a patient's family member "all at once" or "over the course of a shift." You decide if this is appropriate for you and your assigned family. We will have the discussion suggested in paragraph 3 beginning of class 3.</p>

Class #3 September 1 / October 27, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
Ways of Knowing and Paterson and Zderad's Humanistic Nursing Theory	Ensure "This week in Practice" work is complete (column 3 of previous week); it's ok if you did not succeed in having the conversation. Read ch.3 of text. Respond in writing to question #1 in Chapter Highlights with respect to Humanistic Nursing Theory only	Prepare for midterm – knowledge of content ch 1, 2, and part of 3 – (pp 89-103) Ways of Knowing and Paterson and Zderad's Humanistic Nursing Theory.  Prepare feedback for members of your small group – use form provided.

Class #4 September 8 / November 3, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<b>Midterm exam –30 minutes 0830-0900</b> Peer feedback re small group participation  Family and Nursing in Context Family in Context Building contextual knowledge of Family Health; 2 approaches Knowing our own contextual location  Families and nurses in the health care context	Ensure "This week in Practice" and peer evaluation work is complete (column 3 previous week)  Read ch 4. Written response to Chapter Highlights' Questions 1-3, <b>OR</b> - Complete This week in Practice exercise and written response; you are <b>not</b> directed to take up the suggestion you pick a location that is "a street corner notorious for illegal activity."	<b>Try it out 4.1 as requirement for course completion.5% of participation mark</b> - Submit hard copy of selected article to me next week. You could research a family health issue that caught your interest over the first half of practicum.

Class #5 September 15 / November 10, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
Cultivating the Skills of reflexivity and self knowing – particular emphasis to body knowing	Ensure "This week in Practice" work is complete – <b>required assignment due</b> (column 3 previous week) Read Ch. 5 of text. Complete Try it out 5.1 part 1 & 2. – write responses Complete 5.2 "A meaningful experience. Write responses	complete 5.3 Tuesday or Wednesday <b>after</b> clinical.(retrospective reflexivity)  <b>or</b> Do "This week in Practice" during clinical (in-the-moment reflexivity)  <b>Submit Home Visit Paper Monday Sept 18/Nov14 0830</b>

Class #6 September 22 / November 17, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>Being In-Relation</p> <p>The significance of relationships in family nursing: Types of relationships</p> <p>Capacities and skills (personal, professional, and political) that support relational nursing practice with families.</p>	<p>Ensure "This week in Practice" work is complete (column 3 previous week)</p> <p>Read ch. 6 of text.</p> <p>Do Try it out 6.1 1&amp;2. Write responses.</p>	<p>Do this week in practice – Who are you relationally? Write responses</p> <p>Do chapter highlights 1.2 &amp; 3 Write responses</p>

Class #7 September 29 / November 24, 2006		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>The processes and skills of Relational Nursing Practice with Families</p> <p>Assessment and intervention in relational nursing</p> <p>Processes and strategies that can enhance nursing responsiveness to families and support the promotion of health and healing: A Roadmap with some recommended routes and road signs to look for not prescriptive directions for reaching predetermined destination</p>	<p>Ensure "This week in Practice" work is complete (column 3 previous week)</p> <p>Read ch 7 of text.</p> <p>Do Try it out 7.3 Write responses</p>	<p><b>Complete Clinical Practice Reflection Assignment and add selection of previous reflections as appendices.</b></p>

Class #8 October 6 / December 1, 2006		
Using the lenses and skills "all at once" or where you one day want to get to	Read ch. 8	Student activity for the "next week in practice" –prep for next class
Using the lenses and skills "all at once" or where you one day want to get to	<p>Ensure "This week in Practice" work is complete (column 3 previous week) <b>Clinical Practice Reflection paper is due in class @ 0830.</b></p> <p>Read ch. 8</p>	<p>None you're finished – you are invited to read chapter 9 the hard spots in Family nursin.- connecting across differences.</p> <p>You will find rereading this book along the educational journey brings new insights as you gain more clinical experience and deepen all types of knowledge.</p>