



A POLYTECHNIC INSTITUTION

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

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

<b>Start Date:</b> August and October, 2007	<b>End Date:</b> October and November, 2007
<b>Total Hours:</b> 27 <b>Total Weeks:</b> 9	<b>Term/Level:</b> 3 <b>Course Credits:</b> 2
<b>Hours/Week:</b> 3 <b>Lecture:</b> 1 <b>Lab:</b>	<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

■ **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.

■ **Verification**

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

  
Authoring Instructor

June 8, 2007  
Date

I verify that this course outline has been reviewed.

  
Program Head/Chief Instructor

June 11, 2007  
Date

I verify that this course outline complies with BCIT policy.

  
Dean/Associate Dean

June 11, 2007  
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
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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:*

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

See weekly schedule of required text readings.

Additional required readings may be announced.

*Recommended Books:*

Crowe, Cathy. (2007). *Dying for a home: Homeless activists speak out..* Toronto: Between the Lines.

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

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

**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.

#### **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 and may receive a Zero (0) or Unsatisfactory (U) in the course, and the Associate Dean will recommend to the BCIT Vice-President, Education and/or President, that the student be expelled from the program.

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

**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/>

## ■ 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 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.



*A POLYTECHNIC INSTITUTION*

**BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY**

**SCHOOL OF HEALTH SCIENCES**

**BACHELOR OF SCIENCE IN NURSING**

**Nursing 3033**

**FAMILY NURSING THEORY**

**COURSE SYLLABUS AUGUST 2007**

Written by  
Course Leader and Instructor  
Dorothy Cumming

## ■ Course Process and Evaluation

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.

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) Student Participation in Seminar **25%** of course grade based on:

- i. Group participation (10%) as assessed class 4, (**Sept 7/Nov 2**) and class 8 (**Oct 5/Nov 30**) See form below for evaluation criteria. Each student completes written assessment for each member of the group and provides written and verbal feedback in the group. The instructor will consider the group participation evaluations when determining each student's participation mark.
- ii. Submission of one hard copy article retrieved from **professional research literature** and a word processed **paragraph** written by you (5%, **Due Class 5, Sept 14/Nov 9**):
- iii. Submission of two specific homework exercises from required weekly homework **appended to the final paper due Oct 5/Nov 30**. See final paper assignment for details.

### 2) Midterm Test –multiple choice, matching and short answer questions, 45 minutes in class **25% Sept 7/Nov 2**.

The exam will test knowledge of content in Ch 1 and 2 and part of Chapter 3 (pp 89-103)– Ways of knowing and Paterson and Zderad's Humanistic Nursing Theory.

### 3) Analysis of Reflexive/Relational Practice with families in community and acute care settings – **combined value of 50% of course grade:**

- i. 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 17 hard copy to instructor mailbox/Tuesday Nov 13 e-copy to instructor @ 0830**. (See Home Visit Assignment for details)
- ii. Written reflection of nursing practice with one assigned family in second half of family nursing practicum. – **20% due Friday Oct 5/Nov 30 @ 0830 in class**. (See Clinical Practice Reflection Assignment for details)

■ **Assignments**

1)

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

Criteria	Evaluation #1	Evaluation #2
Participates actively during small group discussions. (2 marks)		
Promotes effective group functioning. (2 marks)		
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. (12 marks)		
Critiques intentional development of additional way of knowing using selected "lens" – spiritual, phenomenological or critical. (2 marks)		
Gives and receives constructive feedback. (2 marks)		
<b>Total</b>	<b>/20</b>	<b>/20</b>

Each student will complete a Group Participation Evaluation form for each student in the group for class 4 and class 8. The instructor will consider the group participation evaluations when determining each student's participation mark.

Full marks should be awarded for meeting each criterion consistently; half marks for meeting criterion inconsistently. No marks should be awarded if a criterion is rarely met.

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

**Full Name of student being evaluated:** \_\_\_\_\_

**Full Name of student evaluating:** \_\_\_\_\_

## Assignments (cont'd)

- 2) Submission of one article retrieved from the **professional research literature** and a word processed **paragraph** written by you (5%, **Due Class 5, Sept 14/Nov 9**):
  - a) Identify the family health issue under consideration, and,
  - b) Summarize the contextual (or sociopolitical) knowledge you gained from this article.(See text, chapter 4, pp. 126-127 including "Try it Out 4.1" for sample health issue searched and knowledge gained.)
- 3) Review of reflexive/relational practice with families in community (**Part A – Due Monday Sept 17 hard copy to instructor mailbox/Tuesday Nov 13 e-copy to instructor @ 0830**) and acute care settings (**Part B Due Friday Oct 5/Nov 30 @ 0830 in class with required homework exercises appended**).

### Part A: Home Visit

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

- o To engage in conversation with members of a family to experience and come to know a family in the home and community setting.
- o To engage in a process of knowing "self" in relation to a particular family
- o To view the family narrative through a phenomenological, critical or spiritual lens.

#### The paper has three sections and answers the following questions:

- 1) What did we learn about our selected family?

State who was present and describe what you learned about your selected family including but not restricted to who is considered "family", what the family says characterizes or 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.

- 2) What did we each learn about ourselves in relation to this family? Note: The knowledge of self discussed in the paper relates in some way to present or future nursing practice.

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:

- 3) What did we learn about using a phenomenological, critical, or spiritual lens (in the moment or with hindsight) to view the family narrative?

Describe attempts to use a phenomenological, critical or spiritual lens as a way of viewing this family's narrative during or following the conversation. The following questions may assist analysis of use of one of the lenses:

- 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: (Read carefully)

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

- o Marks will be awarded for evidence of attempting to invite participation appropriate to each member present and a thoughtful description of knowledge of the family (including required elements) gained through the conversation.

What you learned about yourself that is relevant to *your* nursing practice. 15 marks (30%)

- o Marks will be awarded for thoughtful analysis of what each student learned about self in relation to the family. *If the self knowing discussed does not obviously relate to present or future nursing practice please make the relationship explicit. Do not write long extracts of text material.*

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

- o Marks awarded for thoughtful analysis (using key ideas/assumptions) that indicates conceptual understanding of the selected lens and its intended use.

APA style 10 marks (20%)

- o 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. APA style exemptions: you may omit citation of "personal communication . . ." for summary or direct quote of family words because the paper is based on personal communication with the family; you may use first person pronouns, "I" and "we".
- o The paper **must not exceed 6 pages** excluding title page, references.
- o 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 have a conversation with them in their home. The students will engage in an open conversation that invites the family to say who is "family", define or describe themselves as a family, 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 **must 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. If family members prefer use of pseudonyms in the paper, please invent names you can use consistently. **Do not use initials to identify family members; this is confusing for the instructor to read.** 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.

#### **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.

## Part B: Clinical Practice Reflection Assignment

This assignment requires you to reflect on your application of course content in clinical practice in the latter weeks of the course to offer clear evidence of:

- Newly acquired and valued knowledge of self gained while caring for an assigned family (relationship to nursing practice should be obvious or offered explicitly).
- Consideration of usefulness of **one** philosophical/theoretical perspective.
- Cultivation of relational skills/processes.

Such evidence will be offered by reflecting on the nursing care you provided one of your *assigned* families. You can develop the written paper as works best for you. Some may describe the clinical scenario then offer an analysis; others may describe and analyze along the way. Whatever you do make sure you *analyze* – see the statements of purpose above and marking criteria below.

**You will append two homework exercises:**

Ch 5 Try it out 5.2 A Meaningful Experience

CH 6 This week in practice: Who are you relationally?

### Evaluation Criteria:

- Includes description of knowledge of self newly acquired and reason for valuing this knowledge **(10 marks)**
- Considers how the perspective did or did not guide responsive, ethical, health promoting nursing practice with a particular family. **(10 marks)**
- Identifies relational skills/processes used (consciously/intentionally or realized after the fact) and thoughtfully analyzes present skill level **(10 marks)**
- Includes two required homework exercises as appendices **(10 marks)**
- This is a modified 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
- Write with clarity, precision and economy of expression.
- Length: **4 pages** excluding title page and appendices **(10 marks).**

**Important:** Papers failing to meet minimally acceptable writing style (flow of ideas and meaning is easily apparent) will be returned with a mark of zero.

## Weekly Schedule

Class #1 Aug 17/Oct 12 2007		
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.</p> <p>Review of course outline ensuring weekly schedule is understood and assignments are introduced.</p> <p>Why a relational approach to family nursing?</p> <p>Cartesian/pragmatic view of knowledge</p> <p>Habits of knowing</p> <p>Socioenvironmental perspective for nursing practice</p>	<p>Read the entire course outline carefully; identify need for clarification.</p> <p>Read Ch. 1 of text.</p> <p>Briefly respond in legible writing or word process:</p> <p>Try It Out 1.1 – 1, 2 and 4</p> <p>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 during clinical work.</p> <p>Write brief responses for next class.</p>

Class #2 Aug 24/Oct 19, 2007		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>What is family?</p> <p>Literal – family as entity</p> <p>conceptualizations of family from borrowed theories in nursing:</p> <p>1)Structural-Functional</p> <p>2)Developmental</p> <p>3)Systems</p> <p>"family as a complex relational experience"</p> <p>Relational view of Family health</p> <p><b>Relational nursing practice with families</b></p> <p><b>3 lenses: Hermeneutic phenomenological; critical and spiritual</b></p> <p>Family as a . . . experience</p>	<p>Ensure "This week in Practice" work is complete (column 3 previous week)</p> <p>Read ch.2 of text.</p> <p>Respond in writing to the 3 questions in Chapter Highlights</p> <p>Be prepared to listen to a guest speaker share her story and <b>attempt to use the 3 lenses to focus your attention on different aspects of her life, health and healing narrative.</b></p>	<p>Complete "This week in practice" exercise paragraph one and two; write responses.</p> <p>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.</p> <p>We will have the discussion suggested in paragraph 3 beginning of class 3.</p>

Class #3 Au 31/Oct 26, 2007		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>Spiritual care in nursing practice and use of the spiritual lens in more detail.</p> <p>Ways of Knowing and Paterson and Zderad's Humanistic Nursing Theory</p>	<p>Be prepared to explore your ideas about and experience of spirituality, spiritual care with guest speaker, Becky Vink, Spiritual Care Coordinator, RCH</p> <p>Ensure "This week in Practice" work is complete (column 3 of previous week.</p> <p>Read ch.3 of text.</p> <p>Respond in writing to question #1 in Chapter Highlights with respect to Humanistic Nursing Theory only</p>	<p><b>Prepare for midterm</b> – knowledge of content Ch 1, 2, and part of 3 – (pp 89-103) Ways of Knowing and Paterson and Zderad's Humanistic Nursing Theory.</p> <p><b>Prepare written feedback</b> for members of your small group – use form provided.</p>

Class #4 Sept 7/Nov 2, 2007		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p><b>Midterm exam –45 minutes 0830-0915</b></p> <p><b>Peer feedback re small group participation</b></p> <p>Family and Nursing in Context Family in Context Building contextual knowledge of Family Health – two approaches:</p> <ul style="list-style-type: none"> <li>• Knowing our own contextual location</li> <li>• Families and nurses in the health care context</li> </ul>	<p>Prepare for midterm and complete peer evaluations (column 3 previous week)</p> <p>Read Ch 4.</p> <p>Written response to Chapter Highlights' Questions 1-3, <b>OR</b></p> <p>- 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."</p>	<p><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 Friday in class. You could research a family health issue that caught your interest over the first half of practicum.</p>

Class #5 Sept 14/Nov 9, 2007		
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	<p>Ensure "This week in Practice" work is complete – <b>required assignment due</b> (column 3 previous week)</p> <p>Read Ch. 5 of text.</p> <p>Complete Try it out 5.1 part 1 &amp; 2. – write responses</p> <p>Complete 5.2 "A meaningful experience. Write responses</p>	<p>complete 5.3 Tuesday or Wednesday <b>after</b> clinical.(retrospective reflexivity)</p> <p><b>or</b></p> <p>Do "This week in Practice" during clinical (in-the-moment reflexivity)</p> <p><b>Submit Home Visit Paper <u>Monday Sept 17</u> hard copy to instructor mailbox/<u>Tuesday Nov 13</u> e-copy to instructor @ 0830</b></p>

Class #6 Sept 21/Nov 16, 2007		
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>

Class #7 Sept 28/Nov 30, 2007		
Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>Assessment and intervention in relational nursing practice with families: the processes and skills that can enhance nursing responsiveness to families and support the promotion of health and healing.</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 reflections as appendices.</b></p> <p><b>Prepare written feedback</b> for members of your small group – use form provided.</p>

Topic	Student Preparation Before class	Student activity for the "next week in practice" –prep for next class
<p>Using the lenses and skills "all at once"</p> <p><b>Peer evaluation of group participation</b></p> <p><b>Course and instructor evaluations.</b></p>	<p>Read Ch. 8</p> <p>Ensure "This week in Practice" work is complete (column 3 previous week)</p> <p><b>Clinical Practice Reflection paper is due in class @ 0830.</b></p>	<p>None, you're finished – you are invited to read chapter 9, The Hard Spots in Family Nursing: Relational Nursing as 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>