



A POLYTECHNIC INSTITUTION

School of Health Sciences

Program: Bachelor of Science in Nursing

Option:

NURS 7030
Nursing Practicum 5

Start Date: Group A: August, 2008
Group B: October, 2008

End Date: Group A: October, 2008
Group B: December, 2008

Note: The above time period allows accommodation of individual preceptors' schedules.

Total Hours: 320 **Total Weeks:** ~ 8

Term/Level: 5 **Course Credits:** 13

Hours/Week: ~ 40 Lecture:
orientation classes, meetings with
instructor, and written assignments
= 20 hours total

Other: (Clinical Agency Practicum)
37.5 hours/week
300 hours scheduled

Prerequisites

Course No.	Course Name
NURS 2040	Professional Practice 2
NURS 4000	Nursing and Health Issues
NURS 4032	Nursing Practicum 4
NURS 3020	Clinical Techniques 3
	Current CPR (two person)
	Current CRNBC Student Membership
NURS 7050	Communication for Effective Leadership and Management

NURS 7030 is a Prerequisite for:

Course No.	Course Name
NURS 7134	Nursing Practicum 6: Community Continuing Care
NURS 8800	Community Health

■ **Course Description**

This practicum course will occur in a variety of institutions throughout the Lower Mainland and in a variety of units within those institutions. Placements may also be requested at the East Kootenay Regional Hospital and Fernie District Hospital for students from the College of the Rockies. Context of Practice: Acute medical/surgical units, sub-acute units, transitional care units, rehabilitation services, and residential care units. This practicum provides clinical experience with adults, elderly, and frail elderly.

■ **Evaluation**

- Satisfactory/unsatisfactory standing based on Student, Preceptor, and Instructor evaluation of course outcomes.
- Satisfactory completion of self-evaluation notes. These notes must follow the guideline provided.

■ **Course Learning Outcomes**

Upon successful completion, the student will be able to:

1. implement professional caring based on integrated knowledge and skill.
2. pursue shared meaning by facilitating communication with people.
3. integrate systematic inquiry into practice by:
 - analyzing client issues for unique aspects and responding with appropriate clinical judgments.
 - thinking critically and reflecting while practicing.
4. monitor and evaluate own clinical nursing practice and act to modify it.
5. assume responsibility for own learning needs and value learning as a way of anticipating future work requirements.
6. work collaboratively with members of the health care team in providing appropriate care for a group of patients.
7. demonstrate leadership by being assertive and demonstrating organizational skills.
8. implement technical skills with dexterity.

The Level 5 practicum evaluation form uses clinical practice indicator statements that are organized under the CRNBC Professional Standards. The indicators clarify the level and scope of nursing practice that is expected at this level in order to meet the course outcomes. The relationship between the professional standards and the course outcomes are also noted on the practicum evaluation form.

■ **Verification**

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

Authoring Instructor

Date

I verify that this course outline has been reviewed.

Program Head/Chief Instructor

Date

I verify that this course outline complies with BCIT policy.

Dean/Associate Dean

Date

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

■ **Instructor(s)**

Anne Houseman	Office Location: SE12-418 Room 437	Office Phone: 604-432-8686 E-mail Address: anne_houseman@bcit.ca
Peggy Wyatt	Office Location: SE12-418	Office Phone: 604-432-8782 E-mail Address: peggy_wyatt@bcit.ca
Cathy Hine	Office Location: SE12-418	Office Phone: 604-432-8907 E-mail Address: cathy_hine@bcit.ca
Joan Walker	Office Location: SE12-418	Office Phone: 604-453-4083 E-mail Address: joan_walker@bcit.ca
Denise Beaupre	Office Location: SE12-418	Office Phone: 604-432-8913 E-mail Address: denise_beaupre@bcit.ca

■ **Learning Resources**

Required:

- Previously required textbooks will be useful resources during this practicum experience.
- BCIT Student Guidelines, Policies, and Procedures in the Nursing Program. On-line access available: <http://www.bcit.ca/health/nursing/>. Some policies are included in the student preceptor manual.
- a uniform that complies with program policies
- shoes that comply with program policies
- a watch with a second hand
- a black ink pen
- Philosophy Task Group. (2006). *Bachelor of Science Nursing Curriculum Philosophy*. Burnaby, BC: British Columbia Institute of Technology.
- College of Registered Nurses of British Columbia. (2006). *Scope of Practice for Registered Nurses: Standards, Limits, Conditions*. Vancouver, BC: Author. Available for CRNBC website.

Recommended:

- a pen light
- bandage scissors
- a lock may be required if you use a hospital locker to store coats, etc. while at the hospital

■ **Information for Students**

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

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

Cheating, Fabrication, Plagiarism, and/or Dishonesty:

First Offense: Any student in the School of Health Sciences involved in an initial act of academic misconduct — **cheating, fabrication, plagiarism, and/or dishonesty** will receive a Zero (0) or Unsatisfactory (U) on the particular assignment and may receive a Zero (0) or Unsatisfactory (U) in the course, at the discretion of the Associate Dean.

■ Information for Students (cont'd.)

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.

Attempts:

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

Accommodation: Any student who may require accommodation from BCIT because of a physical or mental disability should refer to BCIT's Policy on Accommodation for Students with Disabilities (Policy #4501), and contact BCIT's Disability Resource Centre (SW1-2300, 604-451-6963) at the earliest possible time. Requests for accommodation must be made to the Disability Resource Centre, and should not be made to a course instructor or Program area.

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

■ Learning Process Threads

Professionalism

Students are increasingly independent with analysis of assessments, care planning, care implementation, and evaluation. They encourage client decision making and integrate this into the plan of care. At this level, students generally take **at least 75%** of the preceptor's workload and the majority of students can manage the full workload with assignment of same tasks back to the RN or LPN. Full workload for a group of patients provides opportunity for students to be organized and that includes "forecasting and front loading." Full scope of practice experience at this level may mean that students take a lesser patient load so that students can focus on holistic care which indicates collaboration with clients, families, doctors, and other health care workers, and decision making in relation to patient care and discharge planning. Students will need assistance when there is a rapid change in patient status.

Communication

Students use positive, pro-client caring attitudes and skills to establish partnerships with clients. The shared meaning they achieve is used to solidify their partnership and individualize the plan of care. Students record and report pertinent patient assessments and nursing care in a timely manner. Students use effective communication strategies to build partnerships with health care consumers and co-workers. Students dialogue with instructor, preceptor, and other health care workers in the process of learning. They use principles of teaching and learning. Students discuss issues thoughtfully, verbally, and in writing.

■ Learning Process Threads (cont'd.)

Systematic Inquiry

Students increase their awareness and support of evidence-based practice. They start to critically think and reflect while nursing rather than only after the fact. Students analyze client issues for unique aspects and respond with appropriate clinical judgments. Students raise questions about nursing practices to analyze alternatives. Students reflect on and analyze their values, beliefs, and assumptions regarding health and partnership.

Professional Growth

Students value learning as a way of promoting professional growth. They assume responsibility for continued knowledge development. They constantly evaluate their care using professional nursing standards and modify their practice to accommodate new learning. Students are responsible for attaining and maintaining a safe level of skill performance. Students continue to develop reflective skepticism. They are responsible and accountable for their actions and write self-evaluation notes that demonstrate progress and achievement of course outcomes and professional requirements.

Creative Leadership

Students maintain ongoing communication with colleagues and work to encourage partnerships with them. Students perform effectively in teams including negotiation and assignment of duties and tasks to other RNs or LPNs. They demonstrate assertiveness. Students are learning to manage a group of clients by becoming more organized, efficient, and quicker in giving care. They are beginning to anticipate the work that will be required throughout the day and set priorities to achieve this. They anticipate the continuum of care required for specific patients. In collaboration with nurses, students take an active role in assessment of discharge needs and discharge planning. They further develop their nursing leadership skills.

Technical Skills

Students are developing precision in the implementation of clinical technical skills. They implement a logical sequence of actions, they are coordinated, and they give safe care. They need supervision with skills they have not previously mastered. As the course progresses, the time and speed are within reasonable limits so the beginning level of articulation is developing. Students review and work within agency and BCIT policies regarding skills.

■ Information Regarding this Practicum

1. **Student request for placement outside what is normally offered:** If a visit by a BCIT instructor is needed, the student is financially responsible for the cost of that visit. These costs include transportation, meals, and accommodation. Telephone and e-mail support is provided.
2. Students are responsible for identifying their own learning needs and consulting with the preceptor and instructor to discuss how to meet these needs.
3. A learning partnership is essential for successful completion of this course. Student, preceptor, and instructor will communicate openly, will demonstrate respect in the relationship, and will work to establish and maintain collaborative relationships. This can be achieved by:
 - correct phone number must be on file. Prompt response to instructor's phone calls is requested.
 - writing an introductory letter to the preceptor. Guidelines and examples are provided.
 - discussing the course outcomes to achieve shared understanding of them. The discussion should include what experiences are needed to support achievement of the outcomes.
 - identifying the evidence required to demonstrate achievement of the outcomes. The clinical practice indicators give direction in this regard. Following guidelines for self-evaluation notes and completing these as required.

■ **Information Regarding this Practicum (cont'd.)**

- initiating regular dialogue throughout the practicum experience and promoting trust in the student/preceptor relationship, so the preceptor is satisfied and safe nursing care is provided by the student.
 - engagement with the instructor as required is necessary for success. Regular dialogue between instructor and student serves to promote learning.
 - using a learning plan to meet knowledge/practice gaps. Students are expected to prepare an initial learning plan that will ensure a focused and effective start in this clinical experience. It may be useful to include "areas for improvement from Level 4." It is expected that the learning plan is specific and measurable. It is up to the student to update learning plans as needed.
 - valuing the instructor's feedback, questions, and prompts that encourage your thinking and consideration of other perspectives or points of view.
4. **In the event of an unusual incident by a preceptorship student, the student must notify the appropriate BCIT instructor within 24 hours. The student may need to fill out a hospital incident report at the time of the incident. A Nursing Program Incident Report is also completed by the student, given to the preceptor for comment, and then mailed or faxed to the BCIT instructor.**

■ **Student Evaluation**

Students must show evidence that the clinical practice indicators are being met. Students are expected to complete self-evaluation notes as directed. The notes must show sufficient thoroughness and thought in order to be accepted. Students are expected to share their self-evaluation with the preceptor. The self-evaluation notes must be completed to achieve a satisfactory standing in this course. The instructor may ask individual students to complete extra self-evaluation notes, to respond to instructor questions, or to engage in a dialogue about the self-evaluation notes (e-mail or phone).

The student completes the practicum evaluation form as provided. The preceptor may add information to the evaluation form. The instructor may add comments to the evaluation form and ultimately has the responsibility to recommend a Satisfactory or Unsatisfactory standing in this course.

■ **Course Evaluation**

Students are expected to initiate discussion with the instructor about any aspects of this course. Opportunity to complete a course evaluation is provided.

■ **Participation**

1. A Level 5 preceptorship student is expected to take responsibility for increasing his/her knowledge base. Students will work with a RN within the RN's assigned workload. Students will assume responsibility to research patient diagnosis, treatment, and ordered medications. Students are also expected to use theory from other sources such as communication and family nursing. Students will use information available on the ward in order to function appropriately. This information includes policy and procedure manuals.
2. Safe nursing care is required. The preceptor will assist the student to gradually accept responsibility for the RN role. As students move along in this experience it is expected that they will work more independently but collaboratively. It is expected that students will dialogue regularly with the preceptor to share information, to seek clarification, and to account for nursing care provided. Students are expected to take responsibility for errors and to document them according to agency and BCIT policies.

■ **Participation (cont'd.)**

3. A student who cannot make progress, is unable to work collaboratively with the preceptor, instructors, staff, and others, and whose care is viewed as inappropriate and/or unsafe will be removed from this course. The preceptor volunteers to take on this role and the preceptor may terminate her/her participation if student progress is poor or patient safety is an issue.
4. A Student Preceptorship Manual provides useful information related to this practicum experience and students are expected to use the manual. Preceptorship students are expected to refer to the **BCIT Student Guidelines, Policies, and Procedures** document. Current edition of BCIT Student Guidelines, Policies, and Procedures is available on-line at <http://www.health.bcit.ca/nursing/>.

■ **Written Requirements**

A. **Self-Evaluation Notes**

Students will complete self-evaluation notes as directed. The self-evaluation is shared with the preceptor. Preceptors read and often add comments to the self-evaluation. The instructor reads the notes and may ask questions and make comments. The instructor may also call the student to clarify, suggest, encourage, and support the student in achieving the course outcomes.

B. **Guidelines for Self-Evaluation Notes**

1. You will receive a template that will give directions related to completing these notes.
2. Mail, e-mail, fax, or deliver your self-evaluation notes to your instructor immediately following the last shift of the set.

If mailing, the address is: Name of Instructor
 Instructor, Level 5
 Nursing Program
 British Columbia Institute of Technology
 3700 Willingdon Avenue
 Burnaby, BC V5G 3H2

If faxing, the number is 604-436-9590. Please include a cover sheet **including the name of sender and receiver.**

3. Share your self-evaluation with your preceptor so that she/he has the opportunity to add comments and to sign the notes. This might be an excellent time to discuss new learning needs and to formulate a plan to meet these needs. **Then forward the page with your preceptor's comments to your instructor.**
4. **Assignments:** Late assignments will **not** be accepted for marking unless the late due date has been negotiated with the instructor.

