



UNIVERSITY OF
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Bachelor of Nursing Regular Track (BNRT)

Nurs 302

ADULT HEALTH PRACTICE

COURSE OUTLINE

Fall 2009

(Sept. 8th to Dec. 8th)

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Calendar Description

Managing care from a holistic and interdisciplinary perspective for more acutely and chronically ill patients with a primary focus on the adult in acute medical/surgical settings.

Course Description

The primary focus of Nurs 302 is on nursing acutely and chronically ill persons primarily, but not exclusively, in the context of the acute care setting. The course is designed to be a guided experience in acute care clinical settings and classroom/lab. It is intended to extend your foundation for nursing practice through continued acquisition and application of clinical knowledge and skills, as well as refinement of clinical decision-making and ability to self-critique.

Course Objectives

In Nurs, 302 you will have opportunities to:

1. extend inquiry into the relationship between clinical nursing knowledge and practice, the individual/family response to disease processes and related wellness strategies,
2. apply nursing frameworks to assist in the development of holistic, comprehensive care planning, intervention, and evaluation,
3. demonstrate professional responsibility, develop caring relationships, and establish practice boundaries within an interdisciplinary context,
4. critically analyze and utilize appropriate theory and/or scientific evidence in your practice,
5. perform an increasing number of the competencies identified by the College and Association of Registered Nurses of Alberta (CARNA); and an increased level of proficiency in the same, and
6. be guided by ethical, legal, and professional standards of nursing practice as described by the Canadian Nurses Association Code of Ethics for Registered Nurses (2002), and the College and Association of Registered Nurses of Alberta (CARNA) Nursing Practice Standards.

Required Resources

It is expected that you will draw upon the textbooks, articles, and professional documentation that you have accumulated to date in your nursing program. Examples of such resources include:

Canadian Nurses Association. (2008). *Code of ethics for registered nurses*. Ottawa, ON: Author.

Curren, A. M. (2005). *Math for meds: Dosages and solutions* (9th ed.). Clifton Park, NY: Thompson Delmar Learning.

Fischbach, F. (2004). *A manual of laboratory and diagnostic tests* (7th ed.). Philadelphia: Lippincott.

Kozier, B., Erb, G., Berman, A.J., Burke, K., Raffin Bouchal, D.S., & Hirst, S.P. (2004). *Fundamentals of nursing: The nature of nursing practice in Canada* (1st Canadian ed.). Toronto, ON: Prentice Hall.

Pugh, M. et. Al. (2000). *Stedman's medical dictionary* (27th ed.). Philadelphia: Lippincott.

Day, R., Paul, P., Williams, B., Smeltzer, S., & Bare, B.. (Eds.) (2007). *Brunner & Suddarth's textbook of medical-surgical nursing – first Canadian edition*. Philadelphia: Lippincott.

You are expected to add to your professional nursing library through an exploration of evidence-based articles relevant to the population and setting in which you are practicing.

Evaluation Components

Clinical Practice		
1. Clinical behaviours and practice		CR/F
2. Clinical Journal (reflections)		CR/F
On campus Laboratory		
3. Lab Test (multiple choice)		CR/F
4. IV Math Competency Test		CR/F

Students **MUST** receive a **satisfactory grade** (CR) in **EACH** of these four components of the course to move forward in the program. An **F grade** will be assigned if you do not receive a satisfactory grade in any one of the four components.

Blackboard Site

To support your learning and to facilitate communication with your peers, Clinical Instructor, and faculty members a web site has been established for this course. It is suggested that you monitor the site on a regular basis. You can access the site through your personal Blackboard page.

Faculty of Nursing, University of Calgary, and Government Policies

Please refer to the University of Calgary calendar (2009-10) <http://www.ucalgary.ca/pubs/calendar/> for policies, including:

Clinical Absences - Within the Nursing Practice Standards established by CARNA (2005) it states that a nurse must ensure their 'fitness to practice' (pg. 5). This means that the nursing student must be able to perform essential functions of the nursing role expected for the lab or clinical practice that they have been assigned to without any mental or physical disabilities/illnesses. Therefore, it is your professional accountability to maintain your state of health and recognize the impact of ill- health may have on patients and colleagues.

To fulfill course requirements, attendance at all scheduled lab and/or clinical practice is required. If you are ill or experience an unforeseen circumstance, you must inform your Clinical Instructor and Course Coordinator as soon as possible. If you miss one or more lab/clinical days due to illness or unforeseen circumstance, you may be at risk for not successfully completing the course. You may be asked to withdraw from the course and complete the course requirements at a later date, or you will be required to make-up the missed hours. Your situation will be reviewed by the Course Coordinator and Associate Dean, Undergraduate Program.

Requests for absences related to nursing scholarship and service learning will be

considered. Please note that travel/social/recreational activities will not be accepted as reasons for absence. A medical note may be requested.

Reappraisals and Appeals - There is a 15 day timeline from the receipt of a mark and a request for reappraisal and/or appeals to the Associate Dean, Undergraduate Programs.

Student Misconduct - Plagiarism is a serious offence which will result in the following penalty and application:

1. In cases in which the dean and/or faculty is satisfied that a student is guilty of plagiarism, cheating or other academic misconduct in circumstances which suggest a clear intention to deceive or otherwise commit an academic offence, the normal penalty will be either suspension or expulsion from the faculty.
2. In cases in which the dean and/or faculty is satisfied that an offence has been committed, but doubt is left as to the existence of a clear intention to deceive or otherwise commit an academic offence, the normal penalty will be probation.
3. In cases where a student is found guilty of more than a single offence, the normal penalty will be expulsion from the faculty, and in the most serious cases, expulsion from the University.

While it is recognized that scholarly work often involves reference to the ideas, data and conclusions of other scholars, intellectual honesty requires that such references be explicitly and clearly noted.

Plagiarism occurs not only when direct quotations are taken from a source without specific acknowledgement but also when original ideas or data from the source are not acknowledged.

For further information on Student Misconduct Policies, please refer to the official online University of Calgary Calendar 2009-2010, Academic Regulations, K. Student Misconduct: www.ucalgary.ca/pubs/calendar/ <<http://www.ucalgary.ca/pubs/calendar/>>

Intellectual honesty is viewed most seriously at the University of Calgary and compliance with standards of intellectual honesty is an expectation.

Withdrawal - See U of C calendar.

Confidentiality - Please note that you have already signed a confidentiality agreement.

Uniform Policy - You are to adhere to the Policy distributed to you in your orientation package in your first year of the program. It is posted on the Blackboard site.

Criminal Record Checks - See U of C calendar.

Academic Accommodation - Students with a disability who may require academic accommodation are advised to register with the Disability Resource Centre in MacEwan Hall 274 (403-220-8237). Students who have not registered with the Disability Resource Centre are not eligible for formal academic accommodation.

Freedom of Information and Protection of Privacy - The information (such as a phone number, address, tracking sites of practica, etc.) that you may be asked to provide is collected under the authority of the Colleges/Universities Act and Freedom of Information and Protection of Privacy Act Section 32(c). It will be used for practicum placement and for contact purposes. Your personal information is protected by Alberta's Freedom of Information and Protection and Privacy Act and can be reviewed on request. If you have any questions about the collection or use of this information, contact the U of C Faculty of Nursing student advisor - Debbie Murphy at 403-220-4636.

Reading Days - November 11 to 15th 2009. There will be no clinical on the 11th (Wednesday).

Course Components

(1) Clinical Practice

You will spend two days per week (days/evenings) in the clinical environment, as assigned. Attendance at all scheduled clinical shifts and conferences is compulsory. Your Clinical Instructor **MUST** be informed as soon as possible should you be ill and unable to attend the clinical shift. In addition to observation and evaluation of your day-to-day practice on your assigned nursing unit, clinical journal reflections, on-campus lab performance, and the IV math test will be used as sources of data upon which to base your final evaluation.

You will be evaluated using a **CR/F** system (**see Appendix 1**). A written evaluation will be provided at mid-term and at the end of term. Please refer to your Blackboard site for a copy of the evaluation forms. In addition, your Clinical Instructor will distribute copies to you during your first clinical shift. You are expected to prepare for both evaluations by bringing a written self-evaluation. At any time, should your Clinical Instructor determine that you are not meeting the course objectives, you will be notified in writing. Thereafter, you, your instructor, and the course coordinator will collectively identify strategies and appropriate time lines to assist you in meeting the course objectives.

Before orientation to the clinical setting, you **MUST** provide your instructor with proof of current CPR Basic Rescuer Certification. Failure to provide this document means that you will be unable to attend clinical.

Clinical Journals

The journal entries will be used by your instructor as one of the sources of data upon which to base your clinical practice mark for the course (**see Appendix 2**). The focus of the journal entries will be on problem-solving/critical thinking skills and your professional development.

Patient Transition Visit

You will complete one visit with a patient, preferably within his or her own home. The focus is on understanding the experience of transition. A signed consent form (**see Appendix 3**) must be returned to your Clinical Instructor. Transitions include such experiences as hospital to home, relocation from one unit to another, or from hospital

into a continuing care facility. Several learning resources are available on the Blackboard site for you to prepare for this experience.

(2) Laboratory Component

Two lab sessions comprise an important aspect of this clinical course. These labs will be held in the Nursing Skills Centre at the University of Calgary

Please refer to your Nurs 302 Blackboard site for lab schedules and Student Lab Guides 1 and 2. Specific lab times will be posted on Blackboard by the CSLC or the course co-ordinator once this information is available.

LAB #1 – Fall 2009 IV Therapy - September 22 or 23

You are to bring the IV Therapy / Senior Skills Kit to this lab (excluding the suction catheter and salem sump tube). Please bring your parenteral supplies (needles, syringes, vials) from your Lab Kit, as well.

In preparation for the Math for IV Therapy and IV Medications Test, you are required to demonstrate evidence of having completed the assigned questions from the summary Self-Tests found at the end of chapters 15-17 in Curren (see Student Lab Guide #1). All work must be shown and a calculator may be used. The CD-ROM in Curren is a valuable additional resource to use for preparation.

LAB #2 – Fall 2009 Blood, Ng and suction - October 6 or 7

Airway Management: Oral / Nasal Pharyngeal Suctioning

The IV Math Test will be written at the beginning of Lab #2 (see Math Policy). You will not be permitted to administer IV medications in the clinical area until the required 90% mastery has been achieved. You will then practice selected senior complex skills. The suction catheter and salem sump tube from your Lab Kit are the required supplies for this lab. Only two re-writes are normally permitted.

Math

In preparation for the safe administration of medications to patients, you have been completing a series of Math Competency Tests. In Nurs 302, you will be learning the basic principles and practices associated with Intravenous Therapy, Intravenous Medication Administration, as well as Blood and Blood Product Infusions. Mathematical calculations pertaining to these skills will be tested with a required level of mastery of 90%. If you fail to achieve 90% on the test related to Lab 1, you will be referred to the

Nursing Skills Centre for remedial assistance and retesting. **This requirement must be met in order to move forward in the program.**

In preparation for the Intravenous Math Test, additional resources are as follows: Two practice worksheets will be available on Blackboard for you to work through independently. Additional practice tests and modules and CD-ROMs are located in the various math texts on reserve in the Learning Centre.

Appendix 1

NURS 302 BNAT: CLINICAL PRACTICE FORMATIVE EVALUATION (Part A)

The ability to critically appraise one's performance is an integral skill of the reflective practitioner of Nursing. During Nurs 302, both instructor and student will chronicle clinical progress for each of the course objectives on an ongoing basis. The criteria related to each objective provides a basis for determining your progress in the course and are deemed satisfactory (S) or unsatisfactory (U/S) by your Clinical Instructor. The final decision regarding the course credit is the responsibility of the Clinical Instructor. Each of the course objectives has been acknowledged, and to facilitate your understanding of the expectations your Clinical Instructor has of you, Clinical Learning Objectives are also identified.

Course Objectives: 1. extend inquiry into the relationship between clinical nursing knowledge and practice, the individual/family response to disease processes and related wellness strategies, 2. apply nursing frameworks to assist in the development of holistic, comprehensive care planning, intervention, and evaluation.		S	U/S
<p>Clinical Learning Objectives:</p> <p>The Student:</p> <p>a. Integrates knowledge (nursing, arts, humanities, medical/biological sciences) necessary to the understanding of health/illness experiences of individuals and their families.</p> <p>b. Using the skills of inquiry (e.g., patient narrative, health history, physical assessment) develops a comprehensive understanding of the patient</p>	<p style="text-align: center;">Evidence</p> <p><i>The formative evaluation should include examples of HOW the student demonstrated (or not) the criteria outlined. This evidence should be dated and written clearly and specifically, incorporating language appropriate to the level at which the student is functioning. Part B of this evaluation tool may be helpful to provide daily written feedback to the student. The following questions should assist you in substantiating your evaluation.</i></p> <ul style="list-style-type: none"> • Is the student able to distinguish the type (empirical, personal, esthetic, ethical) and scope (nursing, biological, social, behavioural sciences) of knowledge relevant to the patient situation? • Will the student actively identify what he/she needs to know and then access it? Is the student able to restructure the knowledge to the needs of the patient? • Does the student demonstrate a pattern of knowledge acquisition? Will the student actively seek and generate knowledge identified as necessary to understand the patient situation? E.g., In working with a patient with an amputation... I don't know about the usual pattern of pain (phantom etc.); wound healing in stumps; the experience of grief / loss; effect of the loss of this limb on his ability to work etc. • Can the student engage in the appropriate inquiry based on an understanding of the patient situation and build on the data as necessary? Is the knowledge identified complete and to what level? • To what areas is the data gathering oriented...is it holistic, purposeful, deliberative? • What is the quality of data (specificity)? "My patient seems sad" is different from "My patient is tearful and he is expressing anguish at losing his leg and hopelessness about his future ability to feel "whole again". 		

<p>situation.</p> <p>c. Using a framework, sets goals, assesses, plans, implements, and evaluates nursing care in an individualized manner.</p>	<ul style="list-style-type: none"> • Is the scope and specificity of the data adequate in light of the level of the student? i.e. utilizes all ancillary areas from chart information - lab results, history etc. • Is the student using the nursing process as an organizing framework? How is he/she moving through the logical analysis and synthesis of the data and arriving at priorities? • Is this processing explicit? Does the student need ++ help to make connections and draw conclusions about the patient and his/her current health challenges and goals? • Is the student re-visiting the initial assessment data/hypotheses about the patient over time and recognizing the need for adaptations to his/her care? • Does the student engage in meaningful dialogue with patients to identify and validate relevant nursing interventions? 	
<p>Course Objective:</p> <p>3. demonstrate professional responsibility, develop caring relationships, and establish practice boundaries within an interdisciplinary context,</p>		
<p>The student:</p> <p>a. Effectively uses relational communication practices in interpersonal relationships with the patient, family, health care team members, peers and instructor.</p> <p>b. Demonstrates self-awareness concerning assumptions, feelings and behaviours, how</p>	<p style="text-align: center;">Evidence</p> <ul style="list-style-type: none"> • Does the student initiate meaningful dialogue with the patient? Does the student complete a genogram and ecomap? • Does the student communicate with nurse colleagues and other health professionals in a way that facilitates effective working relationships and effective patient care planning? • Does the student demonstrate increasingly effective written communication skills (documentation)? • Does the student demonstrate awareness of the influence of the context on the establishment of effective relationships with patients/nursing colleagues/other health professionals? • How is the student conveying caring? • Is the student demonstrating deliberative attention to the three phases of a relationship e.g., establishing trust and rapport, building the relationship, caring separation? • What relational practices are being used by the student frequently, sometimes, rarely e.g., attending behaviours eye contact, nonverbal / verbal encouragement, effective questioning, touch, willingness to explore patient concerns, treatment challenges, symptoms, compassion and empathy? • Does the student demonstrate insight into his/her usual communication patterns / behaviours that enhance and/or detract from the establishment of trust and rapport with others (patients, families, team members, peers and instructor)? 	<p style="text-align: center;">S</p> <p style="text-align: center;">U/S</p>

<p>they may affect interactions with others.</p> <p>c. Demonstrates sensitivity, respect, valuing and a commitment to dignity preservation in interpersonal activities.</p> <p>d. Reflects on relational communication patterns through journal entry and in discussion with instructor; is able to identify practices that contribute to, or inhibit the establishment of a professional relationship.</p>	<ul style="list-style-type: none"> • Can the student describe, with specificity, the verbal and emotional components of the nurse/patient dialogue in the nursing situations they are working in? • Is the student able to identify and describe the communication practices that he/she is utilizing within the context of the specific nursing situation he/she is working with? • Does the student reflect on and analyze the meaning of these communication patterns and behaviours? • Does the student analyze interactions with awareness of self, including own beliefs and values? • Does the student independently offer descriptions of these interactions and offer understandings of what has occurred and the implications for care? • Does the student demonstrate engaging in a therapeutic relationship with the patient/ family in which shared meaning of the patient situation is established? 	
<p>Course Objective:</p> <p>4. critically analyze and utilize appropriate theory and/or scientific evidence in your practice,</p>		
<p>The student:</p> <p>a. Provides rationale for care by integrating appropriate scientific (pathophysiology, anatomy, pharmacology) and nursing/psychosocial knowledge.</p> <p>b. Is able to identify patient</p>	<p style="text-align: center;">Evidence</p> <ul style="list-style-type: none"> • Does the student demonstrate active critical thinking in developing understanding of the rationale for care? Does the student initiate this independently? • What is the level of specificity of the rationale provided? • Can the student independently articulate the rationale? • Does the student identify the rationale for care before carrying out the intervention? • Does the student actively and independently access sources of nursing knowledge that provide evidence base? • What are the sources the student draws on to identify the evidence base for the interventions being carried out (is it only their course text or do they seek more sophisticated and up to date sources such as research, journals that focus on evidence base in nursing, data bases of evidence etc) 	<p style="text-align: center;">S</p> <p style="text-align: center;">U/S</p>

<p>issues/needs and mutually prioritize them for the provision of care. Adjusts the plan of care in response to the changing needs of the individual.</p> <p>c. With guidance, applies critical thinking strategies to make sound clinical judgments.</p> <p>d. Submits 3 critical reflections demonstrating evidence of nursing inquiry, critical reflection and integration of knowledge.</p>	<ul style="list-style-type: none"> • What is the type and range of nursing interventions that the student implements in providing care? Does the student only implement interventions that are identified in an a priori way by staff nursing colleagues or standard protocol? • Can the student identify the priorities for care? • Does the student develop a plan of care in collaboration with the patient? (or does the student carry out a plan of care that is only “expert driven”) Does the student individualize the plan of care and interventions? • Does the student plan and carry out interventions that are designed to address a holistic range of patient needs? Does the student transfer knowledge from readings into care planning and creative nursing interventions? • Does the student identify opportunities to engage in health promotion and health education activities? Does the student demonstrate ability to implement appropriate health education activities? Does the student assess patient readiness to learn as well as current knowledge level? 	
<p>Course Objective: 5. perform an increasing number of the competencies identified by the College and Association of Registered Nurses of Alberta (CARNA); and an increased level of proficiency in the same.</p>		
<p>The student:</p> <p>a. Develops learning goals based on prior clinical experiences and current available opportunities.</p>	<p style="text-align: center;">Evidence</p> <ul style="list-style-type: none"> • Does the student reflect on prior learning and define areas for growth or refinement? • Does the student demonstrate an appropriate level of insight relative to his/her strengths and weaknesses and seek specific experiences for growth? • Does the student demonstrate enthusiasm for learning and initiative to challenge his/herself with observational / assistive / inquiry opportunities? • Does the student demonstrate resiliency/adaptability when unexpected events occur e.g., change of patient, tx. regimen? • What approach does the student demonstrate relative to all nursing skills? Is it systematic, e.g. in accordance with the nursing process; deliberative and informed? 	<p>S</p> <p style="text-align: right;">U/S</p>

<p>b. Demonstrates increased confidence performing selected skills (psychomotor, assessment, relational) in a competent and trustworthy manner.</p> <p>c. Organizes safe care for at least two patients for a complete shift (depending on patient acuity).</p>	<ul style="list-style-type: none"> • Is there attention to safety, comfort and dignity preservation of the patient at all times? • Is the skill carried out in an organized manner, beginning with preparation of the nurse, environment and patient? • Does the student demonstrate dexterity with instruments, fluidity of movement and time economization? • Is the student able to recognize / clearly verbalize minor infractions during or upon completion of a skill? • Does the student repeat mistakes or adjust behaviour based on prior experiences and feedback? • Is the student able to apply critical thinking skills and decision-making skills to address variations in practice? • Is the student able to articulate a developing level of confidence and demonstrate a developing level of competence with the various nursing practices? • Is the student able to identify and articulate priorities for care? • Is the student able to recognize and respond to changing patient need? 	
<p>Course Objective: 6. be guided by ethical, legal, and professional standards of nursing practice as described by the Canadian Nurses Association Code of Ethics for Registered Nurses (2002), and the College and Association of Registered Nurses of Alberta (CARNA) Nursing Practice Standards.</p>		
Evidence		
<p>The student:</p> <p>a. Enacts principles of professional and ethical practice (honesty, accountability, integrity, responsibility, reliability, confidentiality, advocacy).</p>	<ul style="list-style-type: none"> • Does the student demonstrate self-awareness relative to his/her own beliefs and values? • How does the student demonstrate the behaviours identified in his/her relationships with patients, peers, health team members, Instructor? • Does the student engage in activities which advocate for the patient / family in response to identified care needs? 	<p>S</p> <p>U/S</p>

<p>b. Identifies learning needs consistent with N213 course Objectives; uses resources and seeks experiences that will facilitate learning.</p> <p>c. Solicits guidance and feedback, conveys an openness to constructive critique and acts on it.</p> <p>d. Adheres to the 5 P's of professional conduct (present, prepared, punctual, participative and professional in comportment)</p> <p>e. Practices in collegial manner with other members of the health care team, keeps primary nurse/instructor well informed, assists team members when able.</p> <p>f. Conscientiously adheres to agency and student policies.</p>	<ul style="list-style-type: none"> • Does the student engage in ongoing reflection about his/her performance and set learning goals in order to grow? • Does the student enter into conversations about his / her practice with maturity and confidence? • Is the student demonstrating the ability to realistically appraise his/her performance (strengths and weaknesses)? • Does the student demonstrate insight into how each of these aspects of professionalism is enacted in practice? • Is the student able to reflect on his/her emerging role as a professional nurse and how this has evolved? • Does the student demonstrate assertiveness vs. passiveness or aggression and is he/she able to distinguish behaviours within all three categories? • Is the student beginning to develop a sense of mutuality and reciprocity as it pertains to patients, peers and members of the health team? • Does the student notify re: absence /illness? • Is uniform policy adhered to? 	
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Appendix 2

Clinical Journal Guidelines

Throughout your clinical practice, it is important for you (and indeed for all students) to write about experiences and reflect on their meanings from a variety of perspectives. You are expected to apply and integrate literature support into your journal entries. This activity encourages you to critically think about your own individual clinical performance, as well as related experiences within the clinical setting to your professional development as a nurse.

Instructor feedback will be provided for each of your reflections. While hopefully not, you might obtain an unsatisfactory grade for your first reflection. If the second reflection is also unsatisfactory, you will be required to resubmit the second submission. You may only do one resubmission. There will be no opportunity to resubmit your 3rd reflection. You must achieve a satisfactory in the 2nd and 3rd reflection submissions to obtain a credit in the course. You are encouraged to review the feedback from your 1st submission prior to writing your 2nd entry, and then to use the accumulated feedback in writing your 3rd submission.

The following guidelines may be helpful to you:

- You will write reflections based on your individual clinical experiences, including interactions with patients, families, and/or members of the interdisciplinary team.
- For **EACH** journal assignment, you will identify **ONE** “experience” in the clinical setting. Your selected experience may be related to a clinical skill or is perhaps relational in nature (with patient, family, and/or healthcare provider).
- Over the term, you will submit three journal entries to your Clinical Instructor for ongoing feedback. Feedback provided to you should be considered for the next submission.
- One of the journal reflections must be developed around the patient transition visit.
- The method of submission (email or hard copy) for your journal entries is negotiable between you and your Clinical Instructor during the 1st week of the term.
- Feedback Criteria: (The purpose of feedback is to enhance your ability of the student to reflect on practice and to apply evidence based knowledge in support of those reflections)
 - Analyzes **ONE** critical experience by examining what occurred, (why it occurred, and what could have been done differently perhaps; or why you would not do it differently).
 - Displays insight into the roles played by self, clinical group members, and interdisciplinary team members.
 - Demonstrates learning from the experience.
 - Relates the experience and learning from it to nursing practice.
 - Shows critical reflection about own professional growth and behaviour (with increasing insight over time).
 - Demonstrates application of related literature and theories to current practice.
- Each journal entry must be **NO MORE** than 3 pages, excluding title page and references. APA (2001) is the required format for your entries. A minimum of 3 references for each submission is required.

Questions to ask yourself when writing and reflecting:

- Describe briefly and then analyze **ONE** experience.
 - What made this experience challenging or interesting to me professionally?
 - What particular questions did the experience raise for me professionally? Ask yourself “so what?”, “then what?”, “now what”, “why?”, “how come?”, “where did that come from?”, “where do I go from here?”
 - What would I have done differently in this experience and why or perhaps why not?
- Insight into roles and interprofessional practice.
 - What relationships did I develop with other health care professionals? What was my role in the experience? Did I feel comfortable? Did this experience create some stress for me? Why? What was the role of others? What impact did these roles have?
- Demonstrate learning.
 - What did I learn from this experience? What feelings were generated through my experience? How do I feel now? How satisfied was I with my experience and why?
- Reflection on growth.
 - What have I learned professionally from this experience? What does all this mean to as a nurse? How will, or will not, my practice change?
 - What did I assume or believe about this experience that has now been challenged?
 - How does this experience fit within the broader context (legal, social, cultural, political) of society and health care?
- Application of professional literature.
 - What information from Nurs 301 course readings, other literature, or other resources would assist me in understanding my experience?

Appendix 3

CLINICAL REFLECTIONS MARKING GUIDELINES

These guidelines, originally developed for use in the Nursing 402 community course, have been modified to support critical reflection in the acute care setting. **In Nurs 302 these guidelines assist the instructor and student in thinking about the ability of the student to critically reflect on his/her practice and the quality of his/her reflections.** These guidelines will assist in assessing course objectives and to formulate the feedback given about the student's level of development.

Evaluative comments may be made by filling in electronically in different colors for each clinical reflection (under each relevant column) and returned to student by email or feedback comments may be made directly on each reflection electronically (track changes or add comments) and emailed back to the student, or feedback may be written on the hard copy.

Feedback Criteria	Excellent Consistently includes critical analysis	Good Some critical analysis with gaps	Unsatisfactory Description only – no analysis
<p>a. Analyzes one critical experience by examining what occurred, (why it occurred, and what could have been done differently).</p>	<p>Reflections demonstrate critical thinking through examining one experience in a critical manner, raising new questions and demonstrating new thinking and new understanding. COMMENTS:</p>	<p>Reflections relate the experience as a learning opportunity and identify feelings about new knowledge and the experience with minimal analysis. COMMENTS:</p>	<p>Reflection is mainly descriptive with little or no acknowledgement of personal feelings and thoughts or analysis of the experience. COMMENTS:</p>

Feedback Criteria	Excellent Consistently includes critical analysis	Good Some critical analysis with gaps	Unsatisfactory Description only – no analysis
<p>b. Displays insight into the roles played by self, clinical group members and interdisciplinary team members.</p>	<p>Reflections demonstrate critical thinking through examining roles in a critical manner, (raising new questions, and demonstrating new thinking and a new understanding of the team development process). COMMENTS:</p>	<p>Reflections examine roles in a limited way (with limited analysis of the impact of the roles on team development or functioning). COMMENTS:</p>	<p>Reflection is mainly descriptive with little or no understanding of roles (and their relationship to team development or functioning). COMMENTS:</p>
<p>c. Demonstrates learning from the experience (with ongoing examination of progress toward learning goals over the term).</p>	<p>Reflections demonstrate clear evidence of learning (by critically examining goal setting, raising new questions and demonstrating new thinking and new understanding through examination of accomplishment of the goals). COMMENTS:</p>	<p>Reflections demonstrate some learning (and relate goal setting as learning opportunities with some analysis related to accomplishment of the goals and limited revision of goals based on new knowledge and experience). COMMENTS:</p>	<p>Reflection is mainly descriptive with little evidence of learning (and little or no review or revision of goals based on new knowledge and experiences). COMMENTS:</p>

Feedback Criteria	Excellent Consistently includes critical analysis	Good Some critical analysis with gaps	Unsatisfactory Description only – no analysis
<p>d. Relates the experience and learning from the experience, to nursing practice.</p>	<p>Reflections critically examine an experience as it relates to community health nursing practice (by raising new questions and demonstrating new understanding about how the experience relates to the role of the nurse in other areas). COMMENTS:</p>	<p>Reflections demonstrate limited examination an experience as it relates to community health nursing practice (with limited analysis of the connection between experiences and the role of the nurse). COMMENTS:</p>	<p>Reflection is mainly descriptive (with limited connection of experiences with the role of the nurse in any setting). COMMENTS:</p>
<p>e. Shows critical reflection on student's own professional growth and behaviour (with increasing insight over time).</p>	<p>Reflections demonstrate critical thinking through examining professional growth in a critical manner (and demonstrating new understanding of personal and professional values, style and philosophy). COMMENTS:</p>	<p>Reflections examine professional growth in a limited way (with some exploration of feelings about new knowledge and experiences and some insight into how these experiences relate to professional growth). COMMENTS:</p>	<p>Reflection is mainly descriptive and appears impersonal (with little or no increasing insight over time). COMMENTS:</p>

Feedback Criteria	Excellent Consistently includes critical analysis	Good Some critical analysis with gaps	Unsatisfactory Description only – no analysis
<p>f. Demonstrates application of related literature and theories to current practice.</p>	<p>Reflections demonstrate critical thinking through applying the literature and theory, (relating the literature/theory to current experiences, raising new questions, and demonstrating new thinking and new understanding of acute care/family practice nursing concepts). COMMENTS:</p>	<p>Reflections relate acute care nursing concepts in an academic manner (with limited connections to current practice and team experiences). COMMENTS:</p>	<p>Reflection is mainly descriptive with little or no connection to acute care nursing concepts. COMMENTS:</p>
<p>g. Formatting, adherence to APA, required number of pages, references used.</p>	<p>COMMENTS:</p>	<p>COMMENTS:</p>	<p>COMMENTS:</p>

General overall comments, Entry #1

INSTRUCTOR SIGNATURE: _____

DATE: _____

General overall comments, Entry #2

INSTRUCTOR SIGNATURE: _____

DATE: _____

General overall comments, Entry #3

INSTRUCTOR SIGNATURE: _____

DATE: _____



UNIVERSITY OF
CALGARY

Appendix 3

Student's Name: _____

ID #: _____

Clinical Instructor's Name: _____

Course: _____

I understand that _____ is a student enrolled in the University of Calgary, Bachelor of Nursing program. As a part of the requirements for the program, I understand the student is required to participate in learning about:

- health experience and importance of communication, and/or
- transition from hospital to home environment

I hereby consent to the student visiting in my home and I understand that I may be providing information to the student which may be of a confidential or private nature. I understand that my identity will be kept confidential and information will be shared only within the professional learning environment. *I understand that the student has signed a confidentiality agreement on admission to the program, and that the University is subject to applicable privacy legislation.*

I understand further that the students are learners in a nursing education program, and not yet registered as practicing nurses. I understand that it is my responsibility to seek independent health care advice when I consider it necessary to do so.

I understand that my consent may be withdrawn at any time by telling the student or contacting the faculty/instructor _____ at

Name *Phone Number*

Signature of Client

Date

Printed Name