

# PROCEDURE

SUBJECT/TITLE:		PAGE:		
Student Learning Plan: Undergraduate Nursing Practice Courses (Calgary Campus and Medicine Hat College Site)				
RELATED POLICY:	DATE ESTABLISHED:			
April 2009				
AUTHORIZATION:	DATE LAST REVIEWED	:		
Practice Policy and Procedure Committee	September 25, 2017 (E	ditorial Revisions)		
Undergraduate Programs Committee	May 17, 2017			
Nursing Council	June 19, 2017			

#### Definition:

In this document:

- "Instructor" refers to any faculty member who teaches an on-campus or off-campus practice course within the Faculty of Nursing.
- "Student" refers to any Student enrolled in the University of Calgary or Medicine Hat College Undergraduate Nursing Program.
- "Learning Plan" is a document that is intended to communicate and document concerns with Student performance in the practice area and to provide strategies for Student success.

#### Purpose:

A Learning Plan is created to support Student success. The Learning Plan will document and communicate concerns with Student performance in the practice area and provide strategies for Student success.

The learning plan should be created by the Instructor in collaboration with the Nursing Practice Course Coordinator (NPCC) and the Student in the following circumstances:

- Student is demonstrating potentially unsafe and/or unprofessional practice behaviours
- Student is not progressing as well as they should
- Student has been absent from practice (on or off campus) and may be at risk of not meeting the course learner outcomes/behavioural indicators by the end of the practice course.

#### Process:

- 1. The Instructor advises the NPCC of the performance issues that have been identified. The NPCC must be consulted and kept apprised throughout the process.
- 2. The Instructor and the NPCC create the learning plan together using the template provided. The Student collaborates with the Instructor to determine strategies for success and may also be involved in other elements of the Learning Plan. The following must be identified (see Appendix A for example):

- a) Area(s) of concern: Briefly state area(s) of concern
- b) **Specific examples from practice:** Clearly state all examples related to each concern, including dates if known
- c) **Related behavioural indicator(s):** State behavioural indicator(s) including description and number.
- d) **Performance/behaviour Student must demonstrate to pass:** Describe the behaviour(s) the Student will display that will indicate the behavioural indicator has been met.
- e) Strategies for success: Outline what the Instructor and the Student or others involved will do or put in place to assist the Student. For example, attending the Clinical Simulation Learning Centre (CSLC), reflecting on error(s), reviewing related theory.
- 3. The NPCC must review the Learning Plan prior to implementation and send a copy to the Associate Dean of Undergraduate Practice Education.
- 4. The Instructor meets with the Student in a private area to review the Learning Plan. The Student and Instructor sign the Learning Plan and each keep a copy. The Instructor provides a signed copy to the NPCC within one week. The NPCC adds his/her signature and provides a signed copy to the Instructor within one week.
- 5. In Nursing 599, the Instructor shall notify the preceptor of the learning plan and request specific feedback on student progress in the area(s) of concern.
- 6. In the event that the Student changes practice sites and / or Instructors during the course, the Learning Plan will be provided to the new Instructor by the initiating Instructor and will continue to be in effect.
- 7. The Student and Instructor meet at planned intervals to review progress. Once it is deemed that a student has successfully addressed an area of concern, the Instructor documents the date in the column provided in the learning plan.
- 8. Upon successful completion of the Learning Plan, the Instructor and Student sign and date the Learning Plan in the spaces provided.
- 9. If the Student is progressing, but has not met all of the learner outcomes/behavioural indicators at the completion date of the Learning Plan, the Instructor consults with the NPCC to determine if the Learning Plan may be extended. If the Learning Plan is going to be extended, then the revised date is documented on the Learning Plan and signed by the Student and Instructor in the spaces provided.
- 10. The Instructor determines if the Student has met the requirements of the Learning Plan. If the Student does not meet the requirements of the Learning Plan, the Instructor consults with the NPCC and meets with the Student. The Instructor documents "Unsuccessful" in the space provided and signs the Learning Plan.
- 11. The Instructor retains the signed Learning Plan and submits it to the NPCC with the Student's mid-term and final evaluations at the end of term.
- 12. The NPCC submits the Learning Plan to the Coordinator, Undergraduate Programs, following the course end date for placement in the Student file.

#### Points of Emphasis:

The following points of emphasis, when followed, will ensure clear and transparent communication that supports both the Student and the Instructor.

#### 1. Clear Communication

When an Instructor has noted pattern(s) of behavior that are not meeting the course learner outcomes/behavioural indicators, it is important that the Student is informed as soon as possible after the Instructor has noted the concern and that the information is shared with him/her verbally and in writing. A Student should be aware of his/her progress throughout the term. The Instructor advises the Student that he/she is at risk of failure upon implementation of the Learning Plan. Planned communication at scheduled intervals will occur between the Student and Instructor for the

duration, and at the end, of the learning plan. Instructor reviews specific examples (Instructor's anecdotal notes/preceptor feedback) with the Student. Student reads and initials the Instructor notes on student progression.

#### 2. Documentation

An essential responsibility of the Instructor is to document the Student's progress in relation to the learning plan. The Instructor will support progress by citing specific examples and sharing this with the Student. The Student identifies his/her learning achievements and reports to the Instructor on a regular basis. There are two key points in relation to documentation:

- a) Documentation must be specific and present clear evidence of accomplishment, or lack thereof, relevant to the behavioural indicators and the Learning Plan; and
- b) Instructors must keep anecdotal notes to support observations, level of achievement, success or failure. Documentation tracks progress and also provides evidence should it be needed.

#### 3. Review of Student File

The NPCC may access Student evaluations from previous courses when the Associate Dean, Undergraduate Programs or the Associate Dean, Undergraduate Practice Education determines that it will either benefit the Student or protect the safety of the patient.

#### **Related Policies:**

Faculty of Nursing: Undergraduate Student Files

Faculty of Nursing: Management and Retention of Anecdotal Notes, Mid-Term Formative Evaluations, Learning Development Plans and Summative Evaluation.



Nursing XXX	
Learning Plan	

Student Name:	
Student UCID:	
Instructor Name:	
Commencement Date of Learning Plan:	
Completion Date of Learning Plan:	

#### **TERMS OF LEARNING PLAN**

\_\_\_\_\_\_\_ is presently enrolled in Nursing XXX. As the course Instructor, I have identified certain clinical performance areas that the Student has not met at this time. \_\_\_\_\_\_\_ must achieve a satisfactory level of performance in the areas outlined below by \_\_\_\_\_\_ [Date]. Successful completion of the following is part of the requirements to achieve a passing grade.

Area of Concern	Examples From Practice	Related Behavioural Indicator(s)	Performance/Behaviour(s) Student Must Demonstrate	Strategies For Success (Developed in collaboration with the Student)	Date of Achievement

Failure to meet the terms of the Learning Plan or unsatisfactory performance in relation to this Learning Plan will result in failure of the course. It is expressly understood that successful completion of this Learning Plan does not automatically result in a successful completion of the course. All related course learner outcomes/behavioural indicators must be met by the end of the course.

The signature of the Student indicates that he/she has had the opportunity to review and discuss his/her clinical performance with his/her Instructor; it does not imply agreement.

Student Signature	Instructor Signature	Nursing Practice Course Coordinat Signature	or
Date Signed	Date Signed	Date Signed	
STUDENT PROGRESS REPORT			
□ Student is progressing, but has	not yet met the learner o	utcomes identified in the Learning Plan. Learning Plar	n will be extended to (date)
□ Successfully completed			
Unsuccessful			
Instructor Signature:		Date:	
Student Signature:		Date:	

### Appendix A

## SAMPLE: Learning Plan Chart

Area of Concern	Examples From Practice	Related Behavioural Indicator(s)	Performance/Behaviour(s) Student Must Demonstrate	Strategies For Success
Unable to plan and carry out nursing care	<ul> <li>Unable to articulate the steps required for tracheal suctioning despite having a patient with a tracheostomy 2 times previously this term (Feb. 14)</li> <li>Did not complete vital signs as ordered (Jan. 20, Feb. 14)</li> <li>Did not recognize the significance of the patients drop in pulse and did not report the change in pulse to the RN (Jan. 20)</li> </ul>	Practices safely. (II.a) Supports clinical activities using evidence-based literature, course acquired knowledge, institution policies and procedures, and nursing theories. (V.a) Identifies and communicates concerns/safety risks of patients, families, self, and the health care team as appropriate. Applies appropriate strategies to support safe care. (II.c)	<ul> <li>Prepare a plan for nursing care (1-3 priorities and related interventions) for the patient and discuss with the NI at 0900</li> <li>After each shift meet with NI to evaluate care provided (were medications and procedures completed on time, report on the 1-3 nursing priorities with assessment of the effectiveness of the interventions)</li> <li>Review procedures as needed in advance of performing them with a patient</li> <li>Perform all procedures on time and safely</li> <li>Report all vital signs outside of normal range to the RN</li> </ul>	<ul> <li>Review current and past course materials as needed to build knowledge base</li> <li>Practice skills in the CSLC</li> <li>Develop a care plan daily to increase knowledge and clinical reasoning</li> <li>Practice self-care</li> </ul>

Medication safety	•	Administered medication by the wrong route. Gave PR medication by PO route (Jan. 10) Administered medication early. Q6 h PRN ibuprofen given 4 hours after the last dose (Jan. 20) Medications were left at the patient's bedside (Jan. 20)	Practices safely. (II.a) Supports clinical activities using evidence-based literature, course acquired knowledge, institution policies and procedures, and nursing theories. (V.a)	•	Consistently prepare and administer medication following safe medication practices Consistently follow the 7 rights and 3 checks of medication administration Consistently follow the University of Calgary Faculty of Nursing Medication Administration policy Administer medications within 30 minutes of the time on the order unless the patient condition warrants that medications be held If medications are late or held notify primary nurse Do not leave medications at the bedside	•	Review the Nurs 489 medication administration on-site practice materials Practice skills in the CSLC Develop a method for organizing medication administration times that will work for you and help to prevent late administration of medications Consult with primary nurse prior to administering PRN medications Review the CARNA Medication Guidelines (2015. http://www.nurses.ab.ca/content/da m/carna/pdfs/DocumentList/Guidelin es/MedicationGuidelines_Mar2015.pd f
Professional behavior	•	Has not submitted the required number of examples for learner outcomes in anecdotal notes since the term began (6 learner outcomes are overdue as of Feb. 24) Has not developed and completed a make-up plan for 12 hours of mandatory time that was missed Is not communicating openly with the project team during on and off campus practice. Is not demonstrating engagement and curiosity for learning.	Maintains professional behaviour, attitude and appearance including but not limited to: Demonstrates enthusiasm and motivation towards clinical practice. Arrives to clinical experiences at assigned time. Completes course requirements as assigned. Maintains fitness to practice. (I.c) Demonstrates commitment to learning by: seeking out learning	•	Submits 6 examples for behavioural indicators in anecdotal notes by (date) Develops and completes make-up plan as agreed by the Instructor by (date) Demonstrates active engagement with project team by contributing a minimum of 3 times during each project meeting	• •	Enters at least two examples into anecdotal notes immediately following project team meetings Send proposed make-up plan to Instructor within 2 days of signing this learning plan Practices contributing to conversations outside of project meetings as well as during project meetings

opportunities;	
actively	
participating in	
discussions;	
gathering and	
sharing of evidence.	
(l.f)	

