N4461 W/X – Professional Practice 4: Integrative Practicum

Calendar description: This course allows students to work with a preceptor to synthesize knowledge and experience gained throughout the program. Students will focus on gaining proficiency in evidence-informed practice, developing leadership skills and independence, and creating an individual philosophy of practice.

Expanded description: This is a professional practice course with a maximum of 456 hours (38 x 12hr shifts or 57 x 8hr shifts) of professional practice experience, inclusive of mandatory orientation, between September 8, 2016 – December 7, 2016. Shifts commence as early as September 9, 2016 depending on site-specific orientations. Students function as contributing members of interprofessional health teams, integrating nursing knowledge and skills, to further develop their professional responsibility and identity. Learning experiences throughout the term include designated assignments, varied reflective practice activities, the professional practice experience itself, and an evaluation of professional practice. Students must meet all course requirements in order to receive a passing grade. Success in this course includes consistent attendance in professional practice, completion of all written work as designated, and satisfactory professional practice performance as determined by the student, the preceptor, and the Clinical Advisor. By the end of the course, students will meet the College of Nurses of Ontario Competencies for Entry-Level Registered Nurse Practice (2014).


Course Goals:

1. Practice ethical, knowledge-based nursing from a strengths-based and evidence-informed perspective in a variety of settings and contexts, and with diverse client populations across the life span.

2. Be reflective, inquisitive, self-evaluative, responsible, and accountable with a commitment to lifelong learning.

3. Demonstrates the use of principles of patient safety and quality care and exercises clinical judgment appropriate to the needs of diverse patients.

4. Develop effective collaborative and therapeutic nurse-client relationships.

5. Develop effective and collaborative relationships within nursing and the interprofessional team members.

6. Incorporate scholarship and critical reflection into own learning and nursing practice.

7. Critically reflect upon the future of nursing practice at professional, social, and political levels through participation in online discussions and in one’s own nursing practice. This includes reflection on the transition from student to Registered Nurse.

Major Concepts in the course:

- Resilience
- Self
- Time/Transitions
- Health and Healthcare Policy
- Health System
- Professionalism: Accountability, Self-Regulation
- Critical Reflection
- Evidence-Informed Practice
- Patient Safety/Quality Care
- Political Influences
- Collaboration
- Advocacy
- Leadership

Competencies for entry-level Registered Nurse practice (CNO, 2014) addressed in the course:

- Professional Responsibility and Accountability (#1-23)
- Knowledge-Based Practice (#24-74)
- Ethical Practice (#75-86)
- Service to the Public (#87-94)
- Self-Regulation (#95-100)

Interprofessional Competencies (CIHC, 2010) addressed in the course:

- Role Clarification
- Collaborative Leadership
- Interprofessional Communication
- Team functioning

Nursing Informatics Competencies (CASN, 2015) addressed in the course:

- Information and Knowledge Management
- Professional and Regulatory Accountability
How this course will contribute to development as a professional nurse:

This course provides students with opportunities to synthesize the knowledge and skills acquired throughout the BScN program in nursing with actual clients in points-of-care practice settings. Locations of practice vary widely, from acute care to community, children to older adults, intensive to chronic care, but competence is required in all areas of nursing. This course enables students to meet the College of Nurses of Ontario Competencies for Entry-level Registered Nurse Practice (2014) required for beginning professional nursing practice.

How this course will contribute to development as an interprofessional team member:

As placements vary, so do opportunities to work as a member of an interprofessional team. Regardless of the context, students are required to collaborate with others to be a contributing team member within the role and scope of practice of a Registered Nurse. Students are expected to work collaboratively and capitalize on opportunities to experience the real world work environment and the dynamics inherent in being a contributing member of a team.

Working together:

Each student has a nurse-preceptor as a mentor throughout the practicum with whom to share their learning journey. In some cases, students may have more than one preceptor. The preceptor(s) assumes a teaching/coaching role to enable students in achieving the course goals. A Clinical Advisor is assigned to each preceptor/student pair and is available for consultation regarding students’ progress and concerns. The Clinical Advisor receives all academic assignments and provides feedback to the student.

On September 8, 2016 students will meet with the Course Coordinator and Clinical Advisors for a course orientation. Attendance at the course orientation is mandatory.

Students will work the schedule of their preceptor(s) which must include at least two or three consecutive days of professional practice weekly. This ensures continuity of care for clients and optimal opportunities for students to achieve course goals and develop their knowledge. Any school or agency-required orientation or learning activities count towards total hours of this course.

Work schedules are submitted electronically as directed by the Clinical Advisor using the editable calendar template provided on the N4461W-000 course site. Be sure this notes which shift you are scheduled for. Please submit the first schedule by September 23, 2016. Any subsequent changes to the work schedule must be submitted to the Clinical Advisor in a timely manner. This is essential so that the Clinical Advisor can arrange visits and other contacts with students and their preceptor(s). Given the variability of preceptors’ schedules, students are responsible for ensuring that they complete the required professional practice hours by the end of term. If the preceptor is absent, the nurse in charge may be asked to determine if an alternative
Registered Nurse is available to supervise the student. If no one is available, the student may not stay for the shift. If the preceptor’s absence extends beyond 1 week, a long term solution must be negotiated with the Nurse Manager/Clinical Educator. Any absence, or issues related to students’ work schedule must be communicated to the Clinical Advisor in a timely manner for assistance in problem solving.

**There are no extensions to the weeks of the course.** All practicum hours must be completed by December 7, 2016.

The decision to allow a student to practice a unit-specific skill, such as venipuncture or IV starts must be made according to agency policy in collaboration with the preceptor, coordinator/educator of the unit, and student. If agency policy permits students to perform a unit-specific skill, and if the preceptor is satisfied with student progress, the student can be recommended for skill education. It is the student’s responsibility to attain the requisite knowledge needed for the skill. Students should have opportunities, with the support of a preceptor, to engage in all activities expected of a beginning nurse on their assigned unit.

The dress policy as located on p.p. 12-13 of the Undergraduate Programs’ Manual is expected to guide how students dress throughout this placement. This manual can be located on the Undergraduate Student Information site in OWL.

**Completing Professional Practice Hours**

This course requires 456 hours (38 x 12hr shifts or 57 x 8hr shifts) of professional practice experience, inclusive of the mandatory orientation. **It is important that students prioritize time working with their preceptor in direct client care.** Students are encouraged to further their own learning independently as expected of all Registered Nurses. Time spent participating in activities that are not part of the day to day unit activities/job description of the preceptor or part of mandatory orientation is not counted towards hours for course completion. Students must ensure appropriate permissions have been obtained for independent learning activities that are not part of this course. A student attending such activities does so as a member of the public, not as a student of the university. From client safety and personal health perspectives, students are advised to not exceed the regular number of consecutive shifts assigned in the practice setting. For agencies with 12 hour shifts this would be 4 per block. For agencies with 8 hour shifts this would 5 per block.

At the end of the term, students must print a hard copy of the PPCE. The face page must be completed, which includes full signatures on the face page and initials of the student and preceptor on every page of the document. This signed document must be delivered to the School of Nursing by **December 7, 2016.** Faxed or electronic copies are not accepted. Notification to the College of Nurses of Ontario to verify course completion will not occur until satisfactory completion of professional practice hours, course work is completed satisfactorily, and all documentation has been received at the School of Nursing.
Required Resources and Texts

Required: None

Recommended:

In preparing to safely care for clients, it is valuable for students to refer to resources and texts that have been required across the program.


Opportunities to Demonstrate Learning

Students engage in both academic and professional practice learning opportunities in this course. The academic activities are designed to contribute to an ongoing development of critical thinking and reflection that are cornerstone elements of professional nursing practice. The academic learning activities include online discussions, written reflections on practice events and a personal philosophy of nursing. Feedback is provided by peers (online discussions) and the Clinical Advisor (written reflections and personal philosophy of nursing).

Professional Practice Evaluation:

Professional practice evaluation is an ongoing, interactive and collaborative process between preceptor and student, involving honest, open, and clear communication. Therefore, students are active partners in the evaluation process and are expected to demonstrate initiative in the evaluation of their practice. Formative evaluation (occurring day-to-day, moment-to-moment) allows for learning and knowledge and skill development. As preceptors provide feedback, students reflect on their experience and adapt their practice to grow professionally. The Clinical Advisor reviews the written evaluation document, visits the student and preceptor(s) and is available for consultation to the evaluative process.

Course/Learning Goals:

The course goals provide a broad framework upon which a student can be evaluated, however, students will also be expected to establish individual learning goals that reflect their unique learning needs to meet CNO (2014) entry-level competencies as well as learning opportunities that exist in the practice setting of the placement. The individual goals will be documented in the narrative section of the Professional Practice Collaborative Evaluation document, using the SMART goal format (see Resource tab in Evaluation folder on the N4461W-000 site).

Documentation of progress on course goals is completed by the student after each block of shifts (typically 4 x 12hr shifts or 5 x 8hr shifts). This document is based on work developed by Lasater (2007) [and adapted with permission] that uses Christine Tanner’s (2006) Clinical Judgment Model. There are four broad dimensions that include effective noticing, effective interpreting, effective responding and effective reflecting. Effective noticing includes: focused observation; recognition of deviations from expected patterns and information seeking. Effective interpreting includes: prioritizing data and making sense of data. Effective responding includes:
calm, confident manner; clear communication; well-planned intervention/flexibility and being skillful. Effective reflecting includes: evaluation/self-analysis and commitment to improvement.

The student and preceptor review the PPCE together three times during the course. Ratings/comments generated from these reviews are to be forwarded electronically to the Clinical Advisor. In the case where a student, preceptor, or clinical advisor is concerned about the student’s competence or the student’s ability to achieve a satisfactory grade in the time allotted, a Collaborative Success Plan (CSP) will be initiated. This form is available in the Resource tab on the N4461W-000 site in the Evaluation folder. All three parties will meet to discuss the concern and agree on the components of the CSP including the plan for improvement. The CSP will be reviewed according to the agreed upon timeline. If there is concern that the components of the CSP are not being met, the Course Coordinator must be informed. Students must meet the goals of any existing CSPs to achieve satisfactory on their PPCE to complete the course. Students must be in the ‘Accomplished (3) or Exemplary (4)’ levels to be rated ‘Satisfactory’ by the end of the course.


**Assignment #1: Modules of the Preceptor Education Program** ([www.preceptor.ca](http://www.preceptor.ca))

**Due: September 30, 2016**

Students are encouraged to use the material in the modules to enhance the learning partnership with their preceptor(s). Using certificates from version 1 of the PEP, or after completing the reflective note at the end of each module in version 2 of the PEP, students will download the Certificate of Completion and all certificates must be submitted to the Assignment dropbox in the N4461W section to which students are assigned.

**Assignment #2: Reflective Practice Reviews (RPRs)**

**Due: Twice per term (Oct 6 & Nov 3, 2016 OR Oct 20 & Nov 17, 2016) opposite to when Online Discussions are occurring**

Using the *Guide for Reflection* found on the N4461W-000 course site in the Resources tab, students will write a 2-3 page double-spaced reflection based on an occurrence from their professional practice. At least 2 scholarly references will be integrated into the reflection. In addition to these sources, a student may also refer to Grey literature sources. See the Western Libraries for more information about Grey Literature at [http://guides.lib.uwo.ca/nursing](http://guides.lib.uwo.ca/nursing). APA (2010), 6th edition, rev. guidelines will be followed. Assignments must be submitted to the Assignment dropbox in the N4461W section to which they are assigned. Students will address Clinical Advisor feedback requiring attention as outlined by the professor.
Assignment #3: Online Discussions
Due: Twice per term (Oct 20-26 & Nov 17-23, 2016 OR Oct 6-12 & Nov 3-9, 2016) opposite to when RPRs are due
Group members meet each other at orientation. During orientation, groups create a team charter to guide participation in the on-line group discussions. Groups also negotiate leader and summarizer responsibilities for each discussion session. Each group member takes a turn as either a topic and discussion leader OR discussion summarizer. Online discussions take place in the Forums tab in the N4461W section to which students are assigned. Only group members and the Clinical Advisor have access to the group’s forum section. See the Guidelines for Online Discussions found in the Resource tab of the N4461W-000 section.

Assignment #4: Philosophy of Nursing (Revisited)
Due: November 14, 2016
This assignment is revisiting a scholarly paper completed at the end of Year 1 where the personal journey of development as a Nurse, and an initial personal philosophy as a Nurse were described. As you are making the transition from student to graduate nurse, this assignment provides an opportunity to reconsider one’s personal philosophy of nursing.

Process:

• If available, review the assignment submitted in year 1. As the assignment was submitted through Turnitin, you can locate your paper in the repository there.
• Describe how your perspectives about nursing practice may have been changed or been reinforced since the beginning of the program. Consider seminal events/people who have contributed to your journey. Provide concrete examples from your placements, courses studied, personal experiences.
• Describe your current personal philosophy of Nursing
• Write the paper in the first person since this is a reflective assignment
• Include a minimum of 2 scholarly nursing references
• Submit the assignment electronically first to Turnitin, then to the Assignment dropbox in the N4461W section to which you have been assigned
• Length 1250-1500 words
• Follow APA (2010) 6th edition (rev.) format
## Summary of Opportunities to Demonstrate Learning

<table>
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<tr>
<th>OPPORTUNITIES TO DEMONSTRATE LEARNING</th>
<th>COURSE GOAL(S) ADDRESSED</th>
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<td>1. Preceptor.ca Modules</td>
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<td>4. Philosophy of Nursing (Revisited) submit through Turnitin</td>
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Please refer to Undergraduate BScN Programs Manual posted on the Western Undergraduate Program site for policies, procedures and progression requirements related to the program. Students and faculty are required to read the Undergraduate BScN Programs Manual and be familiar with its contents. The Program Manual is available on Sakai in the Undergraduate Student Information (https://owl.uwo.ca).

### Policies

All policies related to assignments are in the Undergraduate BScN Programs Manual on the Western web site at owl.uwo.ca and on the Fanshawe College web site in the Program manual located in the Virtual Home Room at www.fanshaweonline.ca. Please read the policies on Accommodation for Medical Illness-Undergraduate Students and Student Medical Certificate.

### Scholarly Requirements

In this program, scholarly writing is a requirement. Therefore, all scholarly papers will follow the sixth edition of the Publication manual of the American Psychological Association (2010), which includes guidelines for both content and format. In addition, all other writing will follow APA (6th ed., revised) format when citing or referring to an author’s work or ideas. Failure to do so is unethical and is plagiarism.

### Plagiarism

Student work is expected to be original. Plagiarism is a serious academic offence and could lead to expulsion from the nursing program. You are plagiarizing if you insert a phrase, sentence or
paragraph taken directly from another author without acknowledging the work to belong to him/her. Similarly, you are plagiarizing if you paraphrase or summarize another author’s ideas without acknowledging that the ideas belong to someone else. You are self-plagiarizing when you reuse all or part of an assignment that you previously submitted. Students can not present their credited work as new scholarship. You may be asked to submit your work, at the discretion of the Clinical Advisor, to turnitin.com to verify originality (see Scholastic Offence Policy in the Western Academic Calendar or Fanshawe College Policy Manual).

Western site students: http://www.westerncalendar.uwo.ca/2013/print_pg113.html#
Fanshawe site students www.fanshawec.ca/assets/policies/pdf/2g04.pdf

Assignments and Exams
Please refer to the following site specific links for information on penalties for late assignments, re-grading of assignments, and the protocol for missed mid-term or final exams. Undergraduate BScN Programs Manual for Westerns academic guidelines owl.uwo.ca or Fanshawe College Policy Manual for Academic Policies and Procedures
http://www.fanshawec.ca/assets/policies/pdf/2c02.pdf

Electronic Devices
Electronic devices are useful in assisting with the teaching/learning process in both classroom and professional practice settings. In the classroom or praxis setting, devices should be used in a manner that is not distracting to others or oneself.

In professional practice placement settings, please abide by the policies set by the agency in regards to use of social media, internet, and handheld devices. Additionally, technology use in the presence of clients or agency staff may require explanation as to its use as part of professional practice (e.g., a drug guide on a smart phone).

It is essential that client privacy and confidentiality be maintained when using electronic devices. When students and Clinical Advisors are communicating via electronic devices, client information must not be included. Students and Clinical Advisors are accountable for responsible use of electronic communication, this includes; using professional language, setting device to silent/vibrate mode in the practice setting, and refraining from personal communications when at their practice placement.

Attendance
Due to the significance of theoretical and practice knowledge in developing professional competence, students are expected to demonstrate professional responsibility through regular attendance at, and, participation in all scheduled learning activities. Much of the learning that takes place is a result of preparation and engagement with the material and active dialogue with colleagues and faculty. Share contact information with your preceptor(s) in the event they need to need to contact you regarding a change in schedule or unanticipated absence. If your preceptor is absent, the nurse in charge can assign an alternate Registered Nurse for the shift. If the absence is expected to be longer than one week, please seek the assistance of the unit manager/educator regarding longer term mentoring coverage. Keep your Clinical Advisor informed.
Mental Health
Students who are in emotional/mental distress should refer to the following links for a complete list of options about how to obtain help.
MentalHealth@Western http://www.uwo.ca/uwocom/mentalhealth/
Fanshawe College Counseling Services http://www.fanshawec.ca/counselling/ and
iCopeU http://icopeu.com/fanshawe/home.html

Student Safety
Please refer to the Undergraduate BScN Programs Manual section on Student Safety Concerns: Guidelines for Responding in the Practice Setting Environment and the Student Safety Flow Chart found on the Undergraduate Programs site at owl.uwo.ca, or Fanshawe, Safe College Campus, 2008 www.fanshawec.ca/assets/policies/pdf/1d05.pdf

Learning Skills Services
The Student Development Centre at Western provides free support for all students to strengthen their skills and improve or maintain their academic performance. The focus is on helping students learn and study more effectively so that they can achieve their academic goals. You can find out more about this service at www.sdc.uwo.ca/learning

Medication Administration
To ensure safe practice, medication administration in professional practice settings requires monitoring of the student by their preceptor. The student is responsible to seek out their preceptor before proceeding with medication administration until independent practice is mutually agreed upon. Medication administration must meet the College of Nurses Practice Standard: Medication (2015). http://www.cno.org/globalassets/docs/prac/41007_medications.pdf
ROLE DESCRIPTIONS

Student

During students’ final integrative practicum, students have the opportunity to further develop and enhance their professional practice

Resource Persons: (1) Preceptor
(2) Clinical Advisor
(3) Agency Clinical Placement Coordinator/Clinical Educator
(4) Supervisor/Manager
(5) Course Coordinator

Performance evaluated by: Self, Preceptor & Clinical Advisor

Role Responsibilities

1. Participating in educational experiences required to meet course goals.
   1.1 Throughout the experiences, in consultation with the preceptor, identifies learning needs and appropriate intervention strategies.
   1.2 Reviews with preceptor and submits to Clinical Advisor.
   1.3 Participates in educational experiences geared to meet course goals.

2. Application of the nursing process or a problem-solving approach in the delivery of safe, effective, and professional interventions in the practice situation.
   2.1 Assesses, plans, implements, and evaluates interventions.
   2.2 Maintains complete, accurate, and concise records and reports in accordance with organizational policies.
   2.3 Progresses toward independent practice through the provision of increasingly complex assignments.
   2.4 Keeps preceptor informed of progress in work or client assignments.
   2.5 Confers with preceptor as required.
   2.6 Demonstrates priority setting and work organization principles.
   2.7 Participates in planning and decision making activities.
   2.8 Identifies learning needs related to assignments.

   3.1 Updates the PPCE after each stretch of shifts.
   3.2 Reviews PPCE with preceptor as scheduled.
   3.3 Utilizes ongoing feedback provided by preceptor to improve performance.
4.  Integration within the organization.

   4.1 Functions as a team member.
   4.2 Utilizes organizational philosophy, policies, and procedures.
   4.3 Utilizes resources prudently (e.g. time, equipment, supplies, human resources).

5.  Other responsibilities.

   5.1 Participates in orientation to the organization as required.
   5.2 Provides two Reflective Practice Reviews, submitted by the due dates to the Clinical advisor.
   5.3 Participates in two online discussions.
   5.4 Completes the Philosophy of Nursing Revisited assignment.

PRECEPTOR

The role of the preceptor is to teach, counsel, role model and support the professional growth and development of Western-Fanshawe Collaborative BScN and Compressed Time Frame BScN students in their final professional practice experience. The Preceptor serves as a primary resource to the student.

Resource People:
(1) Agency Clinical Placement Coordinator/Clinical Educator
(2) Supervisor/Manager
(3) Clinical Advisor
(4) Course Coordinator

Role Responsibilities

1. Selection of teaching strategies and learning experiences required to meet identified learning needs of the student.

   1.1 Identifies learning needs based on student’s initial performance in conjunction with student.
   1.2 Develops plan of action to meet course indicators in conjunction with student.
   1.3 Takes advantage of unexpected situations to facilitate student’s incidental learning.
   1.4 Uses Clinical Advisor for consultation in teaching methodology as needed or desired.

2. Monitors student’s application of the nursing process or a problem-solving approach to the delivery of safe and effective interventions in the practice situation.
2.1 Collaborates with the student on assessment, planning, implementation, evaluation and documentation of activities conducted by the student.

2.2 Assures assignments which are of increasing complexity yet within the capabilities of the student. Consults with resource people and student as required.

2.3 Evaluates with the student, proposed interventions and their rationale.

2.4 Demonstrates priority setting and work organization principles.

2.5 Demonstrates or supervises procedures or skills that are new to the student.

2.6 Plans with student to meet learning needs of assigned patients and their families or other populations.

2.7 Evaluates with student effectiveness of preceptor teaching/modelling implemented to meet learning needs.

2.8 Consists with resource people regarding student practice behaviour.

3. Providing ongoing evaluation of student’s performance:

3.1 Provides student with regular feedback and assists student to identify strategies for growth and change.

3.2 Meets regularly to review student’s performance.

3.3 Comments as required on the PPCE.

3.4 Shares observations of student’s performance with appropriate resource persons.

3.5 If required, refers lack of improvement in identified areas of unsatisfactory performance to Clinical Advisor for follow-up.

3.6 Uses Clinical Advisor for consultation in the evaluation process as needed or desired.

3.7 Communicates to student and Clinical Advisor a pass/fail recommendation at the end of the placement.

4. Providing ongoing consultation, guidance and support for the student.

4.1 Initially shares work assignment with student.

4.2 Promotes independent practice by gradually increasing the demands in student’s assignment.

4.3 Promotes student’s independent practice by modifying initial teaching/supervising activities.

4.4 Communicates with student when they are going to be absent.

5. Integration of the student within the organization.

5.1 Introduces student to staff members.

5.2 Interprets and acquaints student with philosophy and objectives, physical layout, protocols, policies and procedures, resources, personnel policies and communication channels within the organization.
6. Maintains and enhances own skills in mentoring/teaching student protégés.

   6.1 Participates in the online learning program: Preceptor Education Program for Health Professionals and Students (www.preceptor.ca)

**CLINICAL ADVISOR**

The role of the Clinical Advisor is to work with the preceptor, the student, the School of Nursing and the agency to help the student meet the course expectations.

Role Responsibilities

1. Acts as a liaison between the School of Nursing and professional practice sites.

2. Assists the orientation for preceptors as requested.

3. Maintains communication through the students’ online discussion groups and telephone, or email contact.

4. Meets with students in a group as appropriate, to discuss professional practice.

5. Meets with students individually on the unit twice during the term.

6. Is available for consultation with the preceptor and student regarding student’s performance.

7. Receives assignments as designated and provides constructive comments.

8. Follows up preceptor’s concerns regarding lack of improvement in areas of unsatisfactory performance; assists in development of Collaborative Success Plans as necessary.

9. Communicates with the Course Coordinator regarding any students requiring support of a CSP, and any other questions or concerns.

10. In collaboration with the preceptor, and additionally considering the academic requirement of the course, the Clinical Advisor determines a pass/fail grade in the course.