

ACCESS TO PRACTICAL NURSING CURRICULUM

JANUARY 2012

**Adapted from the 2011 Practical Nursing Program
Provincial Curriculum by**

Vancouver Community College (March 2012)

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INTRODUCTION

This full-time, diploma was initiated in response to the need for recognizing past education, training and work experience of applicants to the Practical Nursing program. If applicants have achieved a certificate in the following programs: (Health Care Assistant (HCA) or Resident Care Attendant (RCA) or a combined Home Support/Resident Care Attendant (HS/RCA) they may be admitted to the access semester of the Practical Nursing program.

This program credits applicants for their previous B.C. public post-secondary institution RCA or HSA/RCA certificate. Those entering with an education other than from a B.C. public post-secondary institution (HCA; RCA or HS/RCA Certificate) will need to demonstrate their eligibility prior to entrance.

This full-time program prepares graduates to provide nursing care in partnership with other health care professionals. Graduates will be able to care for selected clients chosen on the basis of acuity and complexity in a variety of settings.

Please note: This Access to Practical Nursing curriculum **must** be used in conjunction with the Practical Nursing Provincial Curriculum (2011). Vancouver Community College would like to acknowledge that the first level of the Access to PN Curriculum was adapted from the Practical Nursing Provincial Curriculum (2011). An in-depth comparison of the Health Care Assistant Provincial Curriculum (2008) and the Practical Nursing Provincial Curriculum (2011) and identification of the curriculum gaps resulting from this comparison has led to the development of this Access curriculum.

This three level program is 13 months of full time study and is divided into three levels. The first Level is a combination of Levels 1 and 2 of the Practical Nursing Provincial Curriculum (2011), giving prior learning credits for knowledge and skills acquired in the HCA, RCA, HS/RCA certificate programs. The next two levels are the same as Levels three and four in the Practical Nursing Provincial Curriculum (2011)

This document includes the course outlines for the first Level of the Access to PN program only. Please refer to the Practical Nursing Provincial Curriculum (2011) document for Levels 3 and 4 course outlines, resources, etc.

PROGRAM CORE STANDARDS

The Program Core Standards for the Access to Practical Nursing Program are the same as for the Practical Nursing Program, with the addition of two admission requirements. (See pages 17-19 of the PNPC document, 2011)

A component of developing a provincial curriculum for practical nursing education in BC requires integration of core standards to maintain consistency, collaboration, and coherence.

There are three areas of core standards: 1) general admission requirements, 2) English as an Additional Language requirements, and 3) faculty qualifications to teach in the program. What is outlined below is reflective of the *minimum* standards and expectations.

ADMISSION REQUIREMENTS

Grade 12 graduation or equivalent (ABE, GED)

English 12 with a grade of C+ OR Technical Communications 12 with a grade of B+

Math 11 Principles with a grade of C (current BC curriculum) OR Math 11 Foundations with a grade of C (commencing 2012)

Biology 12 (Human Biology) with a grade of C

Notes for Admission

Human Anatomy and Physiology for Practical Nurses with a minimum grade of C+ or equivalent must be completed by the start of specified courses.

The following are to be completed prior to the first practice education experience:

CPR level “C”

Criminal Record Check

Immunization as required by sites of *practice education* and recommended by BC Centre for Disease Control (2009): diphtheria and tetanus, polio, hepatitis B, measles, mumps and rubella (MMR), varicella, and influenza

Negative TB skin test or chest x-ray

Students who do not meet the immunization requirements may be prohibited from attending practice education experiences given particular Health Authority, or practice education site organization/agency policy.

English as an Additional Language

Applicants with English as an additional language must meet the language requirements set by CLPNBC (2011), and be successful in **one** of the following:

International English Language Testing System (IELTS) - Academic Version with minimum scores of:

Overall Band Score: 7.5

Speaking: 7.5

Listening: 8.0

Reading: 7.0

Writing: 7.5

Canadian English Language Benchmarks Assessment for Nurses (CELBAN) with minimum scores of:

Speaking: 8.0

Listening: 10

Reading: 8

Writing: 7

Test d'évaluation de français (TEF) with a minimum overall score of 750, and the following scores:

Speaking: 5

Listening: 4

Reading: 4

Vocabulary and grammar: 4

Note: Please view CLPNBC current English requirements at the following site:
http://www.clpnbc.org/content_images/documents/Language%20Proficiency%20Requirements%20for%20Registration_July%201.2011.pdf

Faculty Qualifications

The following outlines the minimal standards of qualifications for faculty to teach in the program:

Current practicing license with one of the nursing regulatory Colleges (CLPNBC, CRNBC, or CRPNBC)

A credential in adult education/equivalent or in progress from an accredited post-secondary institution

Three to five years of recent and relevant practice experience (equivalent to full time hours per year)

Other faculty qualifications may be considered for particular courses

Pharmacology (e.g., undergraduate degree in pharmacy, two years of hospital pharmacy experience, registered with the College of Pharmacists of BC)

Professional communications (e.g., undergraduate degree in a Human Services field or discipline or Counselling Psychology)

Anatomy and Physiology (e.g., undergraduate degree in biology, physiology, physician, or equivalent education and experience)

Additional Admission Requirements or the Access to PN Program

600 Hours of work experience, within the last two years, in a care facility where care is provided to a group of Gerontology clients. Work experience must be verified by an official employer letter. Individualized home care experience is not acceptable

A certificate in the one of the following programs: Health Care Assistant (HCA) or Resident Care Attendant (RCA) or a combined Home Support/Resident Care Attendant (HS/RCA).

Post-secondary educational institutions utilizing the Provincial Access to Practical Nurse Program are required to adhere to the core structures of the program. The program matrix, minimum course hours, admission requirements, faculty qualifications, program and course learning outcomes, course descriptions, and concepts must be adhered to.

PROGRAM MATRIX Level A

	Course Name	Minimum Hours	Total Semester Hours
Level A	Professional Practice A	45	540
	Professional Communication A	45	
	Variations in Health A	60	
	Health Promotion A	30	
	Pharmacology A	60	
	Integrated Nursing Practice A	180	
	<i>Consolidated Practice Experience CPE A</i>	120	
	Course Name	Minimum Hours	Total Semester Hours
Level 3	Professional Practice 3	20	306
	Professional Communication 3	20	
	Variations in Health 3	45	
	Health Promotion 3	36	
	Integrated Nursing Practice 3	120	
	<i>Consolidated Practice Experience CPE 3</i>	65	
		Course Name	
Level 4	Professional Practice 4	20	494
	Professional Communication 4	20	
	Variations in Health 4	50	
	Health Promotion 4	24	
	Integrated Nursing Practice 4	180	
	<i>Consolidated Practice Experience CPE 4</i>	200	

Transition to Preceptorship	30
Preceptorship	180
MINIMUM PROGRAM HOURS	1550

THEORY and APPLICATION	985
PRACTICE EDUCATION HOURS	565
TOTAL HOURS	1550

PROGRAM HOURS

In order to be consistent and ensure quality implementation, it is important that all post-secondary institutions offering the PPNP adhere to the minimum course and program hours. Given the diversity among educational program delivery models, the above program matrix can allow for flexibility in course/program delivery.

DETAILED COURSE INFORMATION

The following section of the Curriculum Guide outlines each of the courses in the Provincial Practical Nursing Program. The course outlines reflect the BC Council on Admissions and Transfers template - <http://www.bccat.ca/articulation/resources/outline/>

For each course the following information is provided:

- Course Description: A brief overview of the course giving information useful to learners and others. The description may be used by educational institution approval bodies, in educational institution calendars, or as part of on line or printed materials
- Course Hours: the suggested *minimum* number of hours required for each course
- Learning Outcomes: These describe what knowledge, skills, and abilities the learner will have gained upon successful course completion
- Course Concepts: These provide an overview of the information to be covered in each course and is identified through expected course concepts integrated into each course
- Suggested Learning Activities: These provide examples of activities to facilitate and foster student learning
- Asterix (*): Denotes *required* Aboriginal learning activities to assist students in meeting cultural competencies. Learning activities can be found in Appendix D.
- Suggested Assessments: This section provides potential assessment and evaluation strategies
- Suggested References/Resources: These are a sampling of potential texts, journals, and websites for faculty and student use.

Additionally,

- Opportunities for interprofessional education and/or practice are indicated for appropriate courses
- Appendix F suggests topics for case study, simulation, and problem based learning development.
- Bloom's taxonomy (Anderson & Krathwohl, 2001) was utilized to provide appropriate descriptors for course leveling and learning outcomes (see Appendix G.) For example, entry to practice Practical Nurse graduates are prepared to explain, describe, differentiate, apply, examine, complete, discuss, list, identify.

COURSE OUTLINE: PROFESSIONAL PRACTICE A (45 hours)

Course Description: This theory course provides an introduction to the profession of practical nursing. Legislation that informs PN practice within British Columbia will be introduced. The history of nursing and specifically, the evolution of Practical Nursing within the Canadian health care system will be discussed. The philosophy and foundational concepts of the Provincial Practical Nursing Program are explored. The legislation influencing PN practice with clients experiencing chronic illness and those in residential care settings is examined. Specific professional issues such as responsibility, accountability, ethical practice, and leadership relevant to the PN role in residential care will be explored. Critical thinking and decision making specific to the care of the chronically ill and inter-professional practice will also be addressed.

Pre-requisites: Admission to the Access to Practical Nursing Program. Human Anatomy and Physiology for Practical Nurses with a minimum grade of C+ or equivalent.

Co-requisites: Professional Communication A; Health Promotion A; Variations in Health A; Pharmacology A; Integrated Nursing Practice A.

Course Concepts:

Learning Outcomes: Upon successful completion of this course, the learner will:

1. Describe how legislation, professional standards, code of ethics, and practice expectations inform nursing practice.
2. Identify and discuss professional self-regulation and the implication for individual responsibilities and accountabilities of the Practical Nurse.
3. Explain the role and responsibility of the College of Licensed Practical Nurses of British Columbia (CLPNBC).
4. Describe how the philosophy of caring guides nursing practice.
5. Use self-reflection and reflective journal writing to enhance learning and nursing practice.
6. Cite some examples of self-care strategies for the nurse.
7. Discuss the partnership of nursing (Registered Nursing, Registered Psychiatric Nursing, Licensed Practical Nursing)
8. Recognize and respect the diversity of other health care roles, responsibilities, and competencies.
9. Identify and explain the influence of collaborative and inter-professional relationships on quality practice environments.
10. Demonstrate the ability to access and assess current and relevant scholarly resources to prepare for nursing practice.

11. Discuss culture and diversity within professional practice.
12. Apply ethical decision making principles to case studies.
13. Discuss several theories of nursing leadership
14. Explain how legislation, professional standards, the code of ethics and practice expectations influences nursing practice in residential care.
15. Discuss professional self-regulation and the implication for individual responsibilities and accountabilities of the Practical Nurse in residential care.
16. Identify and apply leadership responsibilities of the Practical Nurse when working with unregulated health care providers.
17. Describe the influence of collaborative and inter-professional relationships on a quality practice environment in residential care.
18. Access others' skills and knowledge appropriately through consultation.
19. Demonstrate the ability to access and assess current, relevant, scholarly resources.
20. Discuss and explain professional responsibility with respect to the cultural diversity and inclusivity of clients and colleagues in residential care.
21. Apply an ethical decision making process to determine actions for ethical dilemmas in nursing practice with clients experiencing chronic illness.
22. Demonstrate self-reflection and reflective journal writing to enhance learning and nursing practice.

Suggested Learning Activities:

Suggested Assessments:

- Ethical case study paper group presentation or debate
- Poster presentation on the role of the LPN
- Written exam – application of the CLPNBC Standards of Practice and Code of Ethics
- Professional portfolio submission (begin in Level A – completion by Level 4)

Suggested References/Resources:

- Professional Practice text
- Nursing Fundamentals text
- Practical Nursing Program Philosophy
- College of Licensed Practical Nurses of British Columbia (CLPNBC) website: www.clpnbc.org Documents: Baseline Competencies for Licensed Practical Nurses (2009); Standards of Practice; Code of Ethics
- www.bclaws.ca
 - Health Professionals Act of British Columbia/PN Regulation
 - Freedom of Information and Protection of Privacy Act
 - Employment Standards Act of BC
- Canadian Inter-professional Health Collaborative (2010). A national inter-professional competency framework. University of British Columbia.
- Nursing Textbooks with the following content:
- Gerontology Nursing Text or Medical/Surgical text with Gerontology content – Canadian Content

- Advanced Directives Legislation: <http://www.ag.gov.bc.ca/legislation/links.htm>
- Advanced Health Care Planning. Fraser Health Authority.
http://www.fraserhealth.ca/index.php?section_id=5393§ion_type=template
- Leadership for Practical Nursing Text – Canadian Content

COURSE OUTLINE: PROFESSIONAL PRACTICE 3 (20 HOURS)

Course Description: this course integrates the concepts from previous professional practice courses and introduces learners to practice in the community. The role of the Practical Nurse as leader is emphasized in interactions with clients and their families, and other health care providers.

Pre-requisites: Successful completion of all Level 2 courses and Consolidated Practice Experience 2.

Co-requisites: Professional Practice 3; Health Promotion 3; Variations in Health 3; Integrated Nursing Practice 3.

Course Concepts: course Outcomes will be met through examination and exploration of the following:

- Legislation influencing PN practice in the context of community care
- PN Professional Practice
- PN Ethical Practice
- Leadership in PN Practice
- Inter-professional practice
- Diversity in PN practice
- Self-care

Learning Outcomes: upon successful completion of this course the learner will be able to:

1. Compare and contrast how legislation, professional standards, code of ethics and practice expectations influences the continuum of care in community mental health care services.
2. Identify and explain professional self-regulation and the implication for individual responsibilities and accountability of the Practical Nurse in the continuum of care.
3. Explain and evaluate the influence of collaborative and inter-professional relationships on a quality practice environment.
4. Consider the roles of other health care providers in determining one's own professional and interprofessional roles.
5. Demonstrate the ability to access and assess current, relevant professional practice resources to prepare for nursing practice in community settings.
6. Explain the professional and legal responsibility of respecting cultural safety, diversity, and inclusivity in the community setting.
7. Apply and evaluate an ethical decision making process to ethical dilemmas in nursing practice of clients from across the lifespan in community settings.
8. Demonstrate self-reflection and reflective journal writing to enhance learning and nursing practice.

9. Explain the importance of self-care strategies for nurses.

Suggested Learning Activities:

Small and large class discussions based on case studies of professional practice responsibility and accountability issues for LPN's practicing in community settings

- Interview a LPN practicing in a community setting to discuss practice issues specific to that setting or a panel discussion with practicing LPN's from community settings
- Discussions regarding professional practice issues in community nursing
- Shadow a LPN in various community settings and discuss role and responsibilities. Compare and contrast to other practice areas
- Evidence-informed practice –resources to guide decision making related to practice issues
- Self-reflection and reflective journal writing to enhance learning and nursing practice
- Inter-professional learning activities on roles and responsibilities of various health care team members in community context
- Professional portfolio completion
- *Inclusivity, communication, post-colonial understanding, mentoring and support. Learning Rubric 3: Fostering Partnerships in Care. University of Victoria cultural safety module 3 (online) – Aboriginal peoples' experiences in relation to health, health care and healing. Learners work through module as homework and come to class for dialogue in small groups, facilitated by faculty
- Learners identify ways to partner with Aboriginal clients, families and communities to create culturally safe, person centred care plans

Suggested Assessments:

- Group presentation on the shadowing experience
- Group presentation of an ethical case study
- Paper on Leadership or Inter-professional practice – APA format
- Professional portfolio submission
- Written exam application of the CLPNBC *Standards of Practice* and *Code of Ethics* to nursing practice in the community setting.

Suggested References/Resources:

- College of Licensed Practical Nurses of British Columbia (CLPNBC) website: www.clpnbc.org Documents: Baseline Competencies for Licensed Practical Nurses (2009); Standards of Practice; Code of Ethics
- Canadian Inter-professional Health Collaborative (2010). *A national inter-professional competency framework*. University of British Columbia.
- Medical/surgical; mental health; maternal child health; community nursing texts – Canadian concepts

- Leadership for practical nursing text – Canadian concepts
- www.bclaws.ca
- Mental Health Act
- Health Professions Act
- Infants Act/Age of Majority
- Community Services Act
- Child, Family and Community Services Act

COURSE OUTLINE: PROFESSIONAL PRACTICE 4 (20 HOURS)

Course Description: this course prepares learners for the role of the Practical Nurse in caring for clients with acute presentation of illness. Legislation influencing PN practice, specific professional practice issues and ethical practice pertinent to PN practice in acute care environments will be explored. Practice issues that occur across the lifespan will be considered. Collaborative practice with other health care team members and specifically the working partnership with RN's in the acute care setting will be examined.

Pre-requisites: Successful completion of all Level 3 courses and Consolidated Practice Experience 3.

Co requisites: Professional Communication 4; Health Promotion 4; Variations in Health 4; Integrated Nursing Practice 4.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Legislation influencing PN practice in acute care environments
- PN professional practice
- PN ethical practice
- Leadership in PN practice
- Inter-professional practice
- Diversity in PN practice

Learning Outcomes: upon successful completion of this course the learner will be able to:

1. Discuss professional self-regulation and the implication for individual responsibilities and accountabilities of the Practical Nurse in the acute care practice settings.
2. Demonstrate knowledge of the legislation – including scope of practice, professional standards and practice expectations – as they relate to practice in acute care practice settings.
3. Identify and justify the influence of collaborative and inter-professional relationships on a quality practice environment in the acute care setting especially as it relates to the clients in this environment.
4. Demonstrate the ability to access and assess current, relevant, scholarly resources to prepare for caring for clients with acute illness.
5. Discuss the importance of respecting cultural diversity and inclusivity.
6. Apply and analyze an ethical decision making process to determine strategies for solutions for ethical dilemmas in nursing practice in acute care practice settings.
7. Demonstrate self-reflection and reflective journal writing to enhance learning and nursing practice.

Suggested Learning Activities:

- Small and large class discussions based on case studies of professional practice responsibility and accountability issues for LPN's in acute care
- LPN's practicing in the acute care setting to discuss professional practice issues – panel discussion with guest speakers
- Shadow a LPN in various acute care settings
- Evidence-informed practice – what resources can be accessed to guide decision making related to practice issues –problem based learning activities
- Inter-professional learning activities regarding roles and responsibilities of members of the health care team in the acute care setting – each group of learners could present their scope of practice; discuss similarities, overlaps, and disparities
- Have BSN and/or RPN and PN learners work together with case studies where client status is changing. Identify what part of that client's care they would each be responsible for; or how they could divide up their client assignments equitably to cover the changing need of this client
- Professional portfolio development
- *Inclusivity, communication, post colonial understanding, respect, mentoring and support. Learning Rubric IV: Supporting diversity. Cultural Safety Module 3: Learners examine and develop leadership skills for honouring diversity in professional practice
- Learner self assessment of progress in cultural competencies

Suggested Assessments:

- Group presentations based on interview/s with practicing LPN's
- Reflective journal the shadowing experience
- Group presentation of an ethical case study
- Paper on Leadership or Inter-professional practice in acute care– APA format
- Written exam application of the CLPNBC Standards of Practice and Code of Ethics to nursing practice in acute care settings
- Professional portfolio submission
- *Case story: students working in small groups to co-create a culturally congruent care plan for characters.

Suggested References/Resources:

- College of Licensed Practical Nurses of British Columbia (CLPNBC) website: www.clpnbc.org Documents: *Baseline Competencies for Licensed Practical Nurses (2009)*; *Standards of Practice*; *Code of Ethics*
- Canadian Inter-professional Health Collaborative (2010). *A national inter-professional competency framework*. University of British Columbia.
- Medical /surgical text – Canadian concepts
- Leadership for practical nursing text – Canadian concepts
- www.bclaws.ca : Pharmacy Act; Schedule II Drugs

COURSE OUTLINE: PROFESSIONAL COMMUNICATION A (45 hours)

Course Description: This course provides learners with the foundational knowledge for caring and professional communication in nursing. It uses an experiential and self-reflective approach to develop self-awareness and interpersonal communication skills in the context of safe, competent and collaborative nursing practice. Communication theory, the nurse-client relationship, therapeutic communication, cross-cultural communication, effective teamwork and learning and teaching concepts will be covered. The learner is provided with an opportunity to develop professional communication skills with clients requiring end of life care.

Pre-requisites: Admission to the Access to Practical Nursing Program

Co-requisites: Professional Practice A; Integrated Nursing Practice A; Variations in Health A; Health Promotion A; Pharmacology A.

Course Concepts:

Learning Outcomes: Upon successful completion of this course, the learner will be able to:

1. Describe fundamental elements involved of the communication process.
2. Demonstrate awareness of self and understanding of self-concept.
3. Identify concepts and nursing actions that promote listening skills (restating, reflecting, clarifying, summarizing and empathy).
4. Identify and demonstrate therapeutic communication.
5. Describe communication barriers to therapeutic communication.
6. Identify characteristics of helping relationships including the family as a client.
7. Identify differences in multi-cultural communication as they relate to the nurse-client relationship.
8. Demonstrate culturally competent communication with aboriginal and indigenous clients, families and peers(First Nation, Inuit and Métis)

****(Describe how information and communication technology is used to support effective client care in collaboration with other members of the healthcare team. Facebook, professional emails, twitters, iphone pics, videos- absence of comp) ? should be taken out ? integrated practice.***

Demonstrate effective inter-professional communication roles, knowledge, skills, and attitudes using appropriate language. ** Level 3 or 4

9. Participates effectively in groups.

10. Identify effective group behaviours and development.
11. Demonstrate giving feedback effectively to: peers, instructors and team-members.
12. Receiving feedback effectively from: peers, instructors, preceptors, team-members, families and clients.
13. Demonstrates principles of assertiveness to confidently express differences, using appropriate language (saying no).
14. Collaborate with team members to create trusting professional relationships

Suggested Learning Activities:

Suggested Assessments:

- Written analysis of a therapeutic communication scenario(s)
- Assignment: record interactions between 2 learners; analyze the helper responses illustrating effective & ineffective communication skills. They will be asked to identify the barriers to effective communication displayed in the scenario and suggest alternative approaches that might have been more effective.
- Mid-term exam
- Comprehensive exam
- Written analysis of a case scenario(s) involving conflict between: nurse-client; nurse family member; nurse doctor.

Suggested References/Resources:

- Professional Communication Skills for Nurses textbook
- College of Registered Nurses of British Columbia (CRNBC). (2005). *Nurse-client relationships*. Practice Standard for Registered Nurses and Nurse Practitioners. Retrieved from <https://www.crnbc.ca/Standards/Lists/StandardResources/432NurseClientRelationshipsPracStd.pdf>
- Lippincott's Nursing Center. (2005). Understanding transcultural nursing. *Nursing* 2005, 35(1), 14-23. Retrieved from http://www.nursingcenter.com/prodev/ce_article.asp?tid=541704
- <http://www.firstnationspedagogy.ca/learning/login/index.php>
- [http://cahr.uvic.ca/nearbc/documents/2010/Indigenous-Cultural-Competency-\(ICC\)-On-Line-Training.pdf](http://cahr.uvic.ca/nearbc/documents/2010/Indigenous-Cultural-Competency-(ICC)-On-Line-Training.pdf)

Evaluation Criteria:

Required Resources:

Additional Resources:

COURSE OUTLINE: PROFESSIONAL COMMUNICATION 3 (20 HOURS)

Course Description: this course focuses on specific professional communication skills used with clients and care providers across the lifespan requiring care in the community.

Pre-requisites: Successful completion of Level 2 courses and Consolidated Practice Experience 2.

Co-requisites: Professional Practice 3; Integrated Nursing Practice 3; Variations in Health 3; Health Promotion 3.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Integration of communication skills
- Ensuring continuity of care
- Problem solving and decision making
- Conflict resolution
- Age appropriate communications
- Adaptation of communication skills appropriate to the client
- Integration of Relational Practice
- Working with groups
- Encouraging responsibility for own health
- Communicating effectively with children
- Communicating effectively with clients experiencing mental illness
- Communicating effectively with clients with developmental disabilities
- Honouring diversity
- Caring and respect
- Integration of Interprofessional Communication
- Interprofessional conflict resolution
- Guidelines for addressing disagreements
- Establishing a safe environment to express opinions
- Reaching a consensus
- Coordinating actions of others during an emergency

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Explain approaches to communicate with the interprofessional team to ensure the continuity of care.
2. Effectively facilitate discussion and interactions among team members in a simulated environment.

3. Facilitate a collaborative problem-solving and decision-making process.
4. Participate and be respectful of all members' participation in collaborative decision making.
5. Describe strategies for managing interprofessional conflict.
6. Discuss specific communication strategies and approaches relative to clients with mental illnesses.
7. Identify communication indicators that may indicate when an individual may be at risk for self harm or harm to others.
8. Identify communication strategies to de-escalate a volatile situation.
9. Discuss the communication skills required for effective collaboration with both Aboriginal and non-Aboriginal health care professionals, traditional medicine peoples/healers in the provision of effective health care for First Nation, Inuit, and Métis clients, families, and communities.
10. Describe specific communication strategies and approaches relative to clients with developmental disabilities.
11. Describe communication strategies to build positive relationships with children.

Suggested Learning Activities:

- Have learners discuss the similarities and differences in communicating with a client with a disability (e.g., cerebral palsy or muscular dystrophy).
- Learners utilize the SBAR format to practice safe, effective and complete care transition reporting.
- Learners interview a family caregiver and identify the caregiver's perspective of the challenges and rewards with communication. How has this changed the life of the care-giver? To include a summary of the interview and reflection on how the learner will incorporate what has been learned into own clinical practice.
- Activity where learners reformulate medical terminology into language young clients can better understand. Practice communication through play and stories.
- Role play situation in which the client is at risk for self-harm.
- Simulation activities with children; clients with mental illness; or clients with disabilities.
- ***Speaking out for Cultural Safety: learners practice using voice to advocate for cultural safety in practice setting**

Suggested Assessments:

- Communication assignments: Have learners role-play or interview a client with mental illness/ developmental disability or a child and analyze the responses, and identify alternative responses.
- Demonstrate knowledge of effective communication strategies through quizzes and exams

Suggested References/Resources:

- Bransletter JE, Domain EW, Williams PD. (2008). Communication themes in families of children with chronic conditions. *Issues in Comprehensive Pediatric Nursing*, 31(4) 171-184.

- McDonald, HL. (2008). Clients with cerebral palsy and complex communication needs identified in barriers to communicating. *Evidence Based Nursing*, 11(1) 30.
- Zenggerle-Levy K. (2006). Nursing the child who is alone in the hospital. *Pediatric Nursing*, 32(2) 226-231.
- Professional communication skills for nurses - text
- Therapeutic communication skills with children - text

COURSE OUTLINE: PROFESSIONAL COMMUNICATION 4 (20 HOURS)

Course Description: the focus of this course is on the advancement of professional communication within the acute care setting caring for clients across the lifespan. The practice of collaboration with health care team members and clients will be further developed.

Pre-requisites: Successful completion of Level 3 courses and Consolidated Practice Experience 3.

Co requisites: Professional Practice 4; Integrated Nursing Practice 4; Variations in Health 4; Health Promotion 4.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Professional Communication in Acute Care Settings
- Communicating within the role of the PN during an emergency
- Collaborating with other team members in providing nursing care to implement and evaluate care
- Problem solving and decision making
- Conflict resolution
- Adaptation of communication skills appropriate to the client
- Relational Practice with Clients Experiencing an Acute Illness
- Role of PN in providing family members with emotional support
- Honouring diversity
- Caring and respect
- Interprofessional Communication in Acute Care Settings
- Supporting colleagues to practice effectively
- Sharing knowledge with unregulated providers, novices and learners

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Identify and articulate when collaboration is required in a changing client situation.
2. Describe approaches to co-create a climate for shared leadership and collaborative practice.
3. Identify elements of respect team ethics, including confidentiality, resource allocation, and professionalism.
4. Explain how to promote and facilitate group cohesiveness by contributing to the purposes and goals of the team.
5. Describe how to reinforce information given to clients by other health-care professionals.

6. Describe how to establish therapeutic relationships within the acute care setting.
7. Identify components that demonstrate a commitment to engage in dialogue and relationship building with First Nation, Inuit and Métis peoples, cultures and health practices.
8. Identify how to effectively provide client and family with emotional support in acute care setting.
9. Identify and use appropriate conflict resolution / mediation strategies through simulation.
10. Identify opportunities and strategies for teaching and learning / sharing knowledge and providing constructive feedback to unregulated care providers, novices, and other learners.

Suggested Learning Activities:

- Interprofessional conflict resolution scenarios and role play exercises
- Interprofessional collaboration with changing client status- problem based learning activity
- Team building exercises and group reflection on the processes and principles involved
- Small group activities to plan, implement and evaluate client care within acute care setting
- Scenarios and role plays to practice effective communication skills with families members
- *Caring interactions in acute care settings: utilize scenarios and role play to gain understanding of elements necessary for culturally safe therapeutic communication while developing awareness of risk of unintended cultural harm to clients using commonly used assessment tools

Suggested Assessments:

- An assignment in which learners analyze one or more scenarios where communication was ineffective. They will be asked to identify the barriers to effective communication displayed in the scenario and suggest alternative approaches that might have been more effective.
- Written analysis of a communication scenario(s) with families
- Application of course concepts and principles through quizzes and exams

Suggested References/Resources:

- Bacal, R. *Organizational conflict: the good, the bad and the ugly* [online article], n.d. Available online: <http://work911.com/articles/orgconflict.htm>
- Communication textbook.
- D'Wynter, L. C. (2006). Keeping the conversation going: Strategies for reducing the impact of sensory, motor, and cognitive changes that affect the quality of communication in older adult clients in long-term care. *Topics in Geriatric Rehabilitation, 22*(3), 256-267.

- Lieu, C. C., Sadler, G. R., Stohlmann, P. D. (2007). Communication strategies for nurses interacting with clients who are deaf. *Dermatological Nursing*,19(6), 541-544, 549-551.
- Professional communication skills for nurses - text
- Gerontological nursing textbook, communication chapters
- Medical/surgical nursing textbook

COURSE OUTLINE: HEALTH PROMOTION A (30 HRS)

Course Description: This introductory course will increase the learners understanding of health promotion within the Canadian context. This includes health enhancement, health protection, disease prevention, health restoration/recovery, care and support. Knowledge of growth and development, health inequities and determinants of health will support the Practical Nurse to provide culturally appropriate and holistic care.

Pre-requisites: Admission to the Access to Practical Nursing Program

Co requisites: Professional Communication A; Integrated Nursing Practice A; Professional Practice A, Health Promotion A, Pharmacology A.

Course Concepts:

Learning Outcomes:

Upon successful completion of this course, the learner will be able to:

1. Explain definitions and concepts related to health promotion
2. Identify and explain epidemiology related to health promotion
3. Explain the difference between primary, secondary, and tertiary prevention
4. Provide examples that explain the difference between health promotion and disease prevention.
5. Discuss the major components of Canada's health care system
6. Discuss client diversity and diversity of health beliefs.
7. Explain how the determinants of health impact individual health and wellness
8. Identify health disparities between Aboriginal people and non-Aboriginal people in Canada
9. Identify the determinants of health of Aboriginal populations
10. Define cultural competence in health promotion
11. Explain the principles of chronic disease management
12. Describe teaching and learning principles to health promotion across the lifespan
13. Describe the steps of communicable disease reporting
14. Describe common normal growth and development theories across the lifespan
15. Explain the concept of harm reduction

Suggested Learning Activities:

Suggested Assessments:

- Presentation on a course topic (35%)
- Midterm exam (30%)
- Final comprehensive exam (35%)

Suggested References/Recources:

Nursing textbook that includes Health Promotion across the lifespan – title???

- Aboriginal Determinants of Health. http://www.healthnexus.ca/events/CTD/pdf/Aboriginal_Health_Determinants_PART2.pdf
- Calendar of Health Promotion Days. <http://www.hc-sc.gc.ca/ahc-asc/calend/index-eng.php>
- Canada Health Promotion Centre's. <http://www.prhprc.usask.ca/links/canadian-health-promotion-research-centres>
- Determinants of Health. http://www.cna-nurses.ca/CNA/documents/pdf/publications/BG8_Social_Determinants_e.pdf
- Growth and development: Concept Map http://wps.prenhall.com/wps/media/objects/3918/4012970/NursingTools/ch20_CM_GroDevTheo_358.pdf
- Growth and development: Theories: <http://www.scribd.com/doc/13135339/Human-Growth-and-Development-Theories>
- Public Health Agency of Canada. <http://www.phac-aspc.gc.ca/hp-ps/index-eng.php>
- Reading, C., & Wien, F. (2009). Health inequalities and social determinants of Aboriginal people's health. National Collaborating Centre for Aboriginal health.
- World Health Organization. http://www.who.int/topics/health_promotion/en/
- Workplace Health Promotion: http://www.who.int/occupational_health/topics/workplace/en/

COURSE OUTLINE: HEALTH PROMOTION 3 (36 HOURS)

Course Description: this course is focused on health promotion as it relates to the continuum of care across the lifespan. Health promotion in the context of mental illness, physical and developmental disabilities and maternal /child health is highlighted. Normal growth and development from conception to middle adulthood is addressed.

Pre-requisites: Successful completion of all Level 2 courses and Consolidated Practice Experience 2.

Co requisites: Professional Communication 3; Integrated Nursing Practice 3; Professional Practice 3; Variations in Health 3.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Normal growth and development - conception to middle adulthood
- Continuum of care for maternal/child health client
- Teaching and learning
- Continuum of care for clients experiencing mental illness
- Substance Abuse
- Health promotion strategies for clients with mental illness and physical or developmental disabilities
- Promotion of safety for clients experiencing mental illness
- Families experiencing violence
- Public health services
- Resource allocation/inequities
- Illness prevention: Immunization
- Harm reduction
- Normal physiological changes related to pregnancy

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Identify normal patterns of growth and development from conception to middle adulthood.
2. Provide examples of public health services available to pregnant women in the community.
3. Describe health promoting strategies for the postpartum client and newborn.
4. Provide examples of mental health/illness services available to clients in the community.
5. Describe how culture may impact utilization of mental health resources.
6. Compare the level of mental health services from urban to rural areas.

7. Explore examples of harm reduction activities.
8. Discuss disparities in the delivery of community health services in BC.
9. Identify and describe health promotion activities for clients living with mental illness and those living with disabilities.
10. Give examples of teaching and learning strategies for care in the community.
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11. Discuss the impact of immunization in health promotion.

Suggested Learning Activities:

- Learners develop health promotion strategy in collaboration with public health or pre-natal group
- Hold a discussion panel of several cultural groups to explore their beliefs on mental illness (invite guest speakers)
- Hold a discussion panel of several groups to discuss birthing practices from a variety of communities and cultures
- Visit pregnancy outreach programs to assess the health promotion activities
- Visit child and youth programs: what health promotion activities do they offer
- Have learners complete a self stress test and develop strategies to maintain personal and workplace wellness
- Develop a teaching plan for clients in the community context
- *Inclusivity, mentoring, respect and support. Health Resources: Research a website/resource database of Aboriginal services to address the health issues identified in Health Trends (HP 1).

Suggested Assessments:

- Scholarly paper: How does culture impacts approaches to managing mental illness; effects of workplace stress on caregivers, etc.
- Have learners complete a scan of their community. Compile a list of available resources for clients experiencing mental health or addiction challenges (present to class)
- Develop a health promotion presentation/information session for youth at a local youth community centre
- Promote a harm reduction activity to high risk population within the post-secondary education setting
- Comprehensive exam

Suggested References/Resources:

- Advocating for maternal, newborn and child health in Canada: Canada's nurses speak up (2010). <http://www.nursesunions.ca/news/advocating-maternal-newborn-and-child-health-canada-s-nurses-speak>
- Center for Addictions and Mental Health
http://www.camh.net/About_CAMH/Health_Promotion/Health_Promotion_Resources/index.html

- Workplace health and safety and the well being of the nurse (2008)
http://www.rnao.org/Storage/36/3089_RNAO_BPG_Health_Safety.pdf
- Newborn Screening in BC.
<http://www.bcwomens.ca/NR/rdonlyres/CD0E67F3D7F-48F1-BC4F-9124E748D227/48239/NewbornDisordersScreened.pdf>
- BC's Aboriginal Maternal Health Project.
<http://www.perinatalervicesbc.ca/sites/bcrcp/files/committees/aboriginal/AboriginalMaternalHealthToolbox.pdf>

COURSE OUTLINE: HEALTH PROMOTION 4 (24 HOURS)

Course Description: this course focuses on health promotion in the context of caring for clients experiencing an acute exacerbation of chronic illness or an acute episode of illness. Examination of health promoting strategies during hospitalization to improve or help maintain clients' health status after discharge occur. Topics also include how to preparing clients for discharge from care through teaching and learning of health promoting strategies.

Pre-requisites: Successful completion of all Level 3 courses and Consolidated Practice Experience 3.

Co requisites: Professional Communication 4; Integrated Nursing Practice 4; Professional Practice 4; Variations in Health 4.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Risk management strategies
- Early detection of illness through screening
- Client teaching and learning
- Culturally appropriate and relevant learning strategies
- Continuum of care (pre-admission and discharge planning)
- Harm reduction

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Formulate teaching strategies to manage or improve client health.
2. Discuss health promotion approaches in acute care settings and in relation to discharge planning.
3. Explain utilization of screening tools for early detection of illness.
4. Identify and explain which immunizations are important for clients experiencing acute illness.
5. Identify culturally sensitive and appropriate health promotion materials.
6. Explain the continuum of care.
7. Explain the discharge planning process.
8. Examine and explore appropriate teaching and learning strategies to prepare clients for discharge.
9. Explain harm reduction strategies for acute care clients at risk.

Suggested Learning Activities:

- Utilizing clients drawn from previous clinical encounters, develop a culturally sensitive discharge teaching plan for selected ages and illness. Learners present to class
- Case study depicting client with learning or sensory deficits, learners will develop appropriate learning strategies
- In groups examine harm reduction strategies for applicable situations
- Using case studies, develop appropriate teaching and learning strategies to prepare clients for discharge
- *Respect, indigenous knowledge. Health access: use evidence informed research to inform practice regarding health access for Aboriginal women

Suggested Assessments:

- Scholarly paper: utilizing learning theories for discharge planning
- Develop poster presentation for tips in designing effective low literacy materials
- Use a technology: web based tool or animation as part of a teaching session, evaluate client response
- Using a case study, develop a client discharge plan including health promotion activities
- Peer review: Have learners critique each other in a client teaching session.
- Develop culturally sensitive and appropriate health promotion materials
- Final comprehensive exam

Suggested References/Resources:

- Bastable, S. (2008). *Nurse as Educator: Principles of teaching and learning for nursing practice*. Toronto, ON: Jones and Bartlett
- Edelman, C., Mandle, C. (2006). *Health promotion through the lifespan*. Mosby.
- Vancouver Coastal Health: An integrated approach to population health. http://www.vch.ca/media/Toward_A_Population_Health_Approach.pdf
- World Health Organization (2010). <http://www.who.int/mediacentre/factsheets/fs172/en/index.html>
- Nursing text with health promotion concepts
- HealthLink BC: Immunization Schedule http://www.healthlinkbc.ca/Routine_Immunization_Schedule.pdf

COURSE OUTLINE: VARIATIONS IN HEALTH A (60 hrs)

Course Description: This course provides the learner with the foundations of disease and illness across the lifespan. Learners will gain an understanding of pathophysiological alterations of body systems. Nursing management of disease and illness across the lifespan with an emphasis on interventions and treatment is also discussed. The learners understanding of pathophysiology as it relates to the ageing process and selected chronic illness will increase. A major focus of this course is on the care of the older adult experiencing a health challenge. Cultural diversity in healing practices will be explored as well as evidence informed research and practice.

Pre-requisites: Admission to the Practical Nurse Program. Human Anatomy and Physiology for Practical Nurses with a minimum grade of C+ or equivalent.

Co-requisites: Professional Communication A; Integrated Nursing Practice A; Professional Practice A, Health Promotion A, Pharmacology A.

Course Concepts:

Learning Outcomes: Upon successful completion of this course the learner will be able to:

1. Describe pathophysiology as it relates to common presentations of disease and illness
2. Give examples of selected cellular alterations
3. Describe the inflammatory and tissue repair processes
4. Explain physical and psychosocial stressors that impact health and healing
5. Explain inflammation, infection, obstruction/occlusion, genetics, familial tendencies, cancer, traumatic injury, tissue repair, congenital and degenerative conditions and their role in health and healing.
6. Explain compensatory and decompensatory mechanisms
7. Describe chronic versus acute disease (health continuum); disease versus illness
8. Explain the pathophysiology and nursing management of disease and illness for body systems across the lifespan
9. Identify traditional healing practices associated with common illness
10. Describe the influence of cultural diversity in health and healing
11. Identify appropriate evidence informed research and practice resources
12. Describe the nursing management of illness associated with ageing
13. Identify altered presentations of illnesses in the older adult client
14. Identify common mental health challenges or mental illness experienced by older adults (e.g., differences between normal aging and symptoms of a mental illness in older adults)
15. Give examples of diversity in traditional healing practices in management of chronic illness

Suggested Learning Activities:

Suggested Assessments:

- Quiz # 1
- Quiz # 2
- Quiz #3
- Group Assignment on Evidence Informed Practice
- Final Comprehensive Examination = 40%

Suggested References/Resources

- Anatomy and Physiology textbook-online resources
- Medical/ Surgical Nursing textbook
- Mental Health textbook
- Pharmacology text
- Drug guide
- Diagnostic reference guide
- Maternal/Pediatric textbook
- Nursing Fundamentals textbook
- Nursing Journals
- Pathophysiology text – instructor resource
- Vaughn, L., Jacquez, F., Baker, R. (2009). Cultural health attributions, beliefs and practices: Effects on health care and medical education. *The Open Medical Education Journal*. (2). P64-67.
- Gerontology textbook
- Diagnostic reference guidebook

COURSE OUTLINE: VARIATIONS IN HEALTH 3 (45 hours)

Course Description: this course focuses on the continuum of care and the development of knowledge related to health challenges managed in the community setting. Pathophysiology and nursing care of clients requiring home health care, rehabilitation, and supportive services in the community will be explored. Cultural diversity in healing approaches will be explored as well as the incorporation of evidence informed research and practice.

Pre-requisites: Successful completion of Level 2 coursework and Consolidated Practice Experience 2.

Co requisites: Professional Communication 3; Integrated Nursing Practice 3; Professional Practice 3; Health Promotion 3.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Physiologic alterations associated with mental illness
- Recognition and presentation of common acute/chronic behaviours associated with mental illness
- Nursing management of common acute/chronic Mental Illness
 - *Nursing management includes: assessment (holistic assessment, data collection including lab values and diagnostics); pharmacology; identification of real/potential problems –nursing diagnoses; planning of specific nursing interventions; implementing care; evaluation of care; interprofessional collaboration; health promotion; client teaching.*
- Cycle of addiction
- Psychosocial rehabilitation
- Physiologic alterations of pregnancy
- Recognition and presentation of common conditions associated with pregnancy
- Disabilities in the pediatric population
- Traditional healing practices associated with mental illness and maternal and child health
- Cultural diversity in health and healing
- Evidence informed research and practice-best practice guidelines

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Describe the use of the DSM IV in classification of mental illness.
2. Explain several models of psychosocial rehabilitation and recovery.
3. Describe physiologic alterations expected in the post partum client.

4. Describe the pathophysiology and nursing management of selected childhood illnesses and disabilities.
5. Describe the pathophysiology and nursing management of clients with selected mental illness across the lifespan.
6. Explain how cultural diversity impacts health and healing.
7. Describe resources for evidence informed research and practice in delivering care in the context of clients accessing care in community settings.
8. Discuss the stigma associated with living with mental illness or physical and/or developmental disability.
9. Describe the continuity of care for clients experiencing addiction/s and or concurrent disorders.

Suggested Learning Activities:

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- In groups, research examples of the pathophysiology and the nursing management (care plans) of common Mental illnesses for clients across the lifespan and present to class. Include evidence informed research and interventions. Refer to Health Authority policies and clinical practice guidelines for best practice.
- In groups, research examples of the pathophysiology and the nursing management (care plans) of common maternal/child illness and disease
- In groups, research examples of the pathophysiology and the nursing management (care plans) of common developmental and physical disabilities
- Develop a concept map focusing on common psychotropic drugs – specifically focusing on the signs and symptoms they target
- Invite speakers to discuss cultural diversity in beliefs in mental health, and maternal/ child health and healing approaches
- Invite a panel of individuals living with a mental illness to discuss how they manage self care
- Interview child and/or parents of a child with developmental/physical disabilities; learners can present poster of this topic to class
- *Respect, inclusivity and indigenous knowledge. Supporting traditional knowledge in health and healing. Learners conduct enquiry into traditional practices through community visits and engagement of Elders
- Mental Health approaches

Suggested Assessments:

- Poster presentation of a mental illness topic encountered in the clinical setting
- Poster presentation of a paediatric physical/developmental disability
- Quizzes
- Midterm exam
- Final exam
- Present lessons in poster presentation

Suggested References/Resources:

- Human anatomy and physiology textbook
- Medical/surgical nursing textbook
- Mental health nursing textbook
- Drug guide
- Pharmacology Text
- Diagnostic reference guide
- Evans, R. J. and Orshan, S. A. (2010). *Canadian maternity: Newborn and women's health nursing: Comprehensive care across the life span* (1st Cdn. Ed.). Philadelphia, Pa.
- Pathophysiology text – faculty resource
- Vaughn, L., Jacquez, F., Baker, R. (2009). Cultural health attributions, beliefs and practices: Effects on health care and medical education. *The Open Medical Education Journal*. (2). P64-67.
- Cystic Fibrosis <http://www.cysticfibrosis.ca/en/index.php>
- FAS <http://www.faslink.org/>
- Eating disorders <http://www.nedic.ca/knowthefacts/statistics.shtml>
- <http://www.bcwomens.ca/Services/PregnancyBirthNewborns/default.htm>
- Film - *Anorexia Bulimias* (NFB Canada). <http://www.onf-nfb.gc.ca/eng/collection/film/?id=54797>
- Complications of pregnancy: <http://www.womenshealth.gov/pregnancy/you-are-pregnant/pregnancy-complications.cfm>
- Centre for Addictions and Mental Health <http://www.camh.net/>
- CIWA Assessment tool:
http://www.reseaufranco.com/en/assessment_and_treatment_information/assessment_tools/clinical_institute_withdrawal_assessment_for_alcohol_ciwa.pdf
- <http://heretohelp.bc.ca/publications/aboriginal-people/bck/3>
- *Bipolar Disorder*. Percy Paul. NFB of Canada. <http://www.onf-nfb.gc.ca/eng/collection/film/?id=53697>
- Harm Reduction Training Manual (2011)
<http://www.bccdc.ca/NR/rdonlyres/C8829750-9DEC-4AE9-8D00-84DCD0DF0716/0/CompleteHRTRAININGMANUALJanuary282011.pdf>
- Psychotropic drug use in pregnancy.
http://www.camh.net/Publications/Resources_for_Professionals/Pregnancy_Lactation/psychmed_preg_lact.pdf
- Manitoba Coalition on Alcohol and Pregnancy.
<http://www.capmanitoba.ca/resources/index.htm>
- Physiology of pregnancy:
<http://www.merckmanuals.com/professional/sec18/ch260/ch260b.html>

COURSE OUTLINE: VARIATIONS IN HEALTH 4 (50 HOURS)

Course Description: this course focuses on pathophysiology as it relates to acute disease and illness of clients across the lifespan, specifically the care of the client experiencing acute illness including nursing interventions and treatment options. Implications of the acute exacerbation of chronic illness will be addressed. Cultural diversity in healing practices will be explored as well as evidenced informed research and practice.

Pre-requisites: Successful completion of Level 3 courses and Consolidate Practice Experience 3.

Co requisites: Professional Communication 4; Integrated Nursing Practice 4; Professional Practice 4; Health Promotion 4.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Physiological changes contributing to acute disease and illness across the lifespan
- Recognition and presentation of common acute disease and illness across the lifespan
- Nursing management of acute disease and illness according to body system
 - *Nursing management includes: assessment (holistic assessment, data collection including lab values and diagnostics); pharmacology; identification of real/potential problems –nursing diagnoses; planning of specific nursing interventions; implementing culturally safe care; evaluation of care; collaborating with other members of the Health Care Team; health promotion; client teaching.*
- Integumentary
- Cardiovascular
- Respiratory
- Musculoskeletal
- Endocrine
- Gastrointestinal
- Genitourinary
- Neurological
- Sensory
- Haematological
- Immune
- Therapeutic interventions and treatments including pharmacology
- Emergency pharmacology
- Traditional healing practices

Learning Outcomes: upon successful completion of this course, the learner will be able to:

1. Explain pathophysiology as it relates to selected common acute illness of clients across the lifespan.
2. Explain the pathophysiology and nursing management of shock (cardiogenic, hypovolemic, neurogenic, anaphylactic, septic).
3. Recognise and explain the pathophysiology and nursing management of fluid and electrolyte imbalances.
4. Explain nursing management of common acute disease and acute exacerbations of acute illness of clients across the lifespan.
5. Identify traditional healing practices related to the acute illness experience.
6. Describe the impact of cultural diversity in health and healing.
7. Access relevant best practice information to support learning.

Suggested Learning Activities:

- In groups, research examples of the pathophysiology and nursing management of common acute disease and illness of clients across the lifespan and present to class
- Develop a concept map describing the phases of shock
- Create a poster or concept map presenting fluid and electrolyte imbalance
- Have learners generate a list of common diagnostic tests associated with each body system of common acute disease and illness of clients across the lifespan. Embed in each class
- In groups, develop nursing care plans for common acute disease and illnesses experienced by clients across the lifespan (include end of life) and present to class. Include evidence informed research and interventions. Refer to Health Authority policies and clinical practice guidelines for best practice
- Invite individuals from diverse cultures including Aboriginal, to speak about their hospital/illness experience
- *Indigenous knowledge. Elder visit – rituals and traditional practices (Healing prayers, smudging, drums, songs, etc.)
- Approaches to pain management: examine the effects of culture on pain management

Suggested Assessments:

- Two quizzes or one quiz and one presentation
- Midterm exam
- Comprehensive final examination

Suggested References/Resources:

- Anatomy and physiology textbook
- Medical/surgical nursing textbook
- Pharmacology text
- Diagnostic reference text
- Drug guide
- Mental health nursing textbook
- Maternal/pediatric textbook
- Pathophysiology text – faculty resource
- Vaughn, L., Jacquez, F., Baker, R. (2009). Cultural health attributions, beliefs and practices: Effects on health care and medical education. *The Open Medical Education Journal*. (2). P64-67.
- Nursing journals
- <http://www.hc-sc.gc.ca/fniah-spnia/index-eng.php>
- <http://www.hc-sc.gc.ca/fniah-spnia/diseases-maladies/tuberculos/index-eng.php>

COURSE OUTLINE: PHARMACOLOGY A (60 hrs)

Course Description: This introductory course examines the principles of pharmacology required to administer medications in a safe and professional manner. Medication administration requires the application of the nursing process for clinical decision-making. The routes of medication administration introduced include medications used to treat constipation, eye and ear disorders and the Integumentary system. Complementary, Indigenous and alternative remedies, and polypharmacy across the lifespan are explored. The learners will gain an understanding of pharmacology and medication administration across the lifespan. Also included are the topics of substance abuse and addiction.

Pre-requisites: Admission to the Practical Nurse Program

Co-requisites: Professional Communication A; Integrated Nursing Practice A; Variations in Health A; Health Promotion A; Professional Practice A.

Course Concepts:

Course Learning Outcomes:

Upon completion of the course the learner will be able to:

1. Describe the responsibility of the LPN in administration of medication.
2. Explain how drug standards and the drug legislation affect drug regulation in Canada.
3. Explain the purpose of the Canadian Drug Acts and their application to nursing practice.
4. Describe the concepts of pharmacodynamics and pharmacokinetics.
5. Identify basic terminology used in pharmacology.
6. Describe the principles of pharmacology as related to common drug actions and interactions.
7. Demonstrate competency with basic mathematical drug calculations.
8. Identify commonly used drug distribution systems in Canada.
9. Explain the principles of medication administration.
10. Describe the routes of medication administration.
11. Apply the nursing process as it relates to medication administration.
12. Identify medications used to treat specific disorders.
13. Identify complementary, Indigenous and alternative therapies.
14. Describe medication classifications, actions, interactions, adverse effects, and nursing implications relative to body systems including: endocrine, neurological, cardiovascular, respiratory, gastrointestinal, genitourinary, musculoskeletal systems, and miscellaneous drug classifications.
15. Describe the effects, uses and indications for antimicrobials, and the relationship to drug resistance.

16. Relate drug interactions, polypharmacy, and food/drug affects to medication used across the lifespan, particularly the older adult.
17. Relate theoretical understanding of narcotic side effects, indications for use, and legal responsibilities.
18. Describe the potential interaction of complementary, Indigenous and herbal preparations with prescription medications.

Suggested Learning Activities:

Suggested Assessments:

- Math Exam -- based on drug dosage calculations, achieve a 100% pass, given 3 attempts to achieve 100% (different exam each attempt). *Learning outcome #7*
- Pharmacology Theory Quiz #1, (*Learning outcomes #1-3*)
- Pharmacology Theory Quiz #2, (*Learning outcomes #1-6*)
- *Pharmacology Theory Quiz #3*
- Pharmacology Theory Comprehensive Final exam, achieve a 80% pass. (*All learning outcomes*)
- **Note: learners must achieve an 80% average overall on the theory portion of pharmacology**

Suggested References/resources:

- Basic Math for Nurses textbook
- Pharmacology for Nurses textbook
- Fundamentals of Nursing text- Canadian content
- Gerontology Nursing Textbook - Canadian Content
- Medical -Surgical textbook– Canadian Content
- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)
- CLPNBC Code of Ethics For LPNs (2004)
- CLPNBC Practice Guideline: Documentation (<http://www.clpnbc.org>)
- CLPNBC Practice Guideline: Medication Administration (<http://www.clpnbc.org>)
- Compendium of Pharmaceuticals and Specialties

Additional Resources:

- Basic Math for Nurses textbook
- www.diabetes.ca
- www.hc-sc.gc.ca
- www.heartandstroke.ca
- www.canadianpainsociety.ca
- Refer to your textbooks for additional on-line resources

PRACTICE EDUCATION EXPERIENCE

Background

Practice education occurs when “students learn and practice in a community, clinical or simulated setting. It is the hands-on experience that helps students learn the necessary skills, attitudes and knowledge required to practice effectively in their field” (BCAHC, 2010). And clinical learning experiences continue as the backbone of nursing education where students bring theory and practice together (e.g., praxis) in a transition to professional practice (Cloutier, 2004; Tanner, 2006).

Health care restructuring and shifts/reductions with community health programs along with increased enrolments in nursing schools have made the allocation of clinical placements for all nursing students extremely challenging. Schools of nursing find themselves competing with other nursing and allied health care programs for limited clinical placements (Reimer-Kirkham et. al, 2005).

Given the above perspectives, practice experiences reflect the realities of the current practice education environment, and provide adequate opportunities for learners to integrate theory and practice in order to be successful in meeting the Baseline Competencies for Licensed Practical Nurses’ Professional Practice (CLPNBC, 2009). Practice education in this curriculum occurs primarily in the Integrated Nursing Practice Course(s) (see course outlines) and through the Consolidated Practice Experience(s).

INTEGRATED NURSING PRACTICE

The Integrated Nursing Practice Course(s) are intended to allow integration of all theory courses expressed through such strategies as simulation², the use of case study, role play, self directed learning , practical application of psychomotor skills in simulated environments, and interprofessional learning opportunities. The intent is to better prepare the learner for success in the Consolidated Practice Experience (CPE).

² Simulation is often equated with low, moderate or high fidelity patient simulators, yet in this context is used as a broader concept inclusive of such activities as patient simulators, screen-based simulations, virtual reality, models, live actors, web-based tools, and various forms of skills training (Schiavenato, 2009).

² Simulation is often equated with low, moderate or high fidelity patient simulators, yet in this context is used as a broader concept inclusive of such activities as patient simulators, screen-based simulations, virtual reality, models, live actors, web-based tools, and various forms of skills training (Schiavenato, 2009).

Simulation

The use and perceived benefits of simulated practice has been well documented by Sanford (2010), Andrusyszyn et al. (2005), Benner et al. (2010), Ironsides (2010), and Jeffries (2008), however, Schiavenato (2009), cautions that there is a paucity of evidence validating the application of simulation in nursing education and little is known about the effect of simulation replacing clinical experience versus simulation augmenting clinical experiences. While the literature indicates that more research is required on the limits and opportunities offered by simulation in nursing education, a study by the BC Practice Initiative (2007) suggests that simulation can reduce the overall time requirements for clinical staff who are supporting and supervising students.

Benner, Sutphen, Leonard and Day (2010), wonder however, whether simulation may be less valuable for learning skills of an interpersonal nature as simulation does not consider the human encounter with “non-verbal cues or psychological withdrawal” (p. 163). They contest that simulation is less ambiguous than real situations and the learner does not experience “risk threats and opportunities” that test their situated thinking and communication (p. 163). Additionally, the inclusion of Aboriginal cultural competencies in the curriculum speaks to the need to highlight Aboriginal epistemology and to decolonize educational practices. Thoughtful consultation and preparation should be given to the introduction of high fidelity simulation and web based learning tools that may create unnecessary barriers to learning for Aboriginal learners.

In this curriculum, simulated learning opportunities are primarily linked with the Integrated Nursing Practice courses and take place in a simulated environment. Direct client contact experience takes place in the Consolidated Practice Experience (CPE).

COURSE OUTLINE: INTEGRATED NURSING PRACTICE A (180 hrs)

Course Description: This course emphasizes the art and science of nursing, focusing on the development of nursing care and assessment. Learners will apply nursing knowledge through the practice of clinical decision making, nursing assessments, and nursing interventions aimed at the promotion of health, independence, and comfort. Classroom, laboratory, *simulation*, and other practice experiences will assist learners to integrate theory from other Access courses to provide sage, competent, and ethical nursing care with clients.

Pre-requisites: Admission to the Access to Practical Nurse Program. Human Anatomy and Physiology for Practical Nurses with a minimum grade of C+ or equivalent.

Co-requisites: Professional Communication A; Professional Practice A; Variations in Health A; Health Promotion A; Pharmacology A.

Course Concepts:

Learning Outcomes: Upon successful completion of this course, the learner will be able to:

1. Demonstrate an understanding of the Scope of Practice for LPNs, *Baseline Competencies for LPNs Professional Practice (2009)*, *Professional Standards of Practice for LPNs (2010)*, *Code of Ethics for LPNs (2004)* and how these guide the practice of LPNs in complex care settings.
2. Safely and competently perform comprehensive nursing assessment and interventions with older adults.
3. Demonstrate safe disposal of sharps (e.g. needles, scalpels, intravenous starters, etc.)
4. Demonstrate critical thinking, clinical judgment and knowledge of assessment to plan, implement and evaluate care of clients in simulated situations and with older adults.
5. Practice in collaboration with older adult clients, the interprofessional healthcare team, peers and faculty.
6. Provide a caring environment for older adult clients by connecting, sharing and exploring with them in a collaborative relationship.
7. Identify potential sources of violence in residential, and home and community care
8. Provide person-centered care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity.
9. Identify own values, biases, and assumptions as a self-reflective, responsible and accountable practitioner.
10. Identify own learning needs to enhance competence
11. Practice safe medication administration

Suggested Learning Activities:

Suggested Assessments:

- 2 Quizzes
- Comprehensive Final Exam
- Integrated Lab Skill assessments

Suggested References/ Resources:

- Nursing fundamentals textbook
- Medical/Surgical textbook
- Pharmacology textbook
- Diagnostic reference guide
- Drug guide
- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)
- CLPNBC Code of Ethics For LPNs (2004)
- CLPNBC Practice Guideline: Documentation
(http://www.clpnbc.org/content_images/documents/Documentation%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Medication Administration
(http://www.clpnbc.org/content_images/documents/Medication%20Administration%20PG_rev.%20092310.pdf)
- PHSA on-line learning modules (Rick Hall, PHSA rhall@phsa.ca)
<http://learn.phsa.ca/phsa/patienthandling/>
- Interior Health's Safe Patient Handling portal
<http://www.interiorhealth.ca/information.aspx?id=12726>
- WorkSafeBC publications/bulletins/videos (contact:
Chloe.Eaton@WorkSafeBC.com)
<http://www2.worksafebc.com/Portals/HealthCare/PatientHandling.asp>
- Clinical Practice Guidelines of local health authority

COURSE OUTLINE: INTEGRATED NURSING PRACTICE 3 (120 HOURS)

Course Description: this course builds on the theory and practice from Level I and II. Through a variety of approaches (e.g., simulation), learners will continue to develop knowledge and practice comprehensive nursing assessment, planning for, and interventions with for clients experiencing multiple health challenges.

Pre-requisites: Successful completion of Level 2 courses and Consolidated Practice Experience 2.

Co requisites: Professional Communication 3; Professional Practice 3; Variations in Health 3, Health Promotion 3; Pharmacology 3.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Comprehensive health assessment
- Clinical decision making
- Nursing interventions
- Risk management
- Surgical wound management (assessment, cleansing, and irrigation)
- Infusion therapy I (assessment of insertion sites including PIC and CVC lines, changing IV tubing and solutions, regulating rate of flow, setting up and priming infusion line, converting IV to an intermittent infusion device, flushing an intermittent infusion device, discontinuing a peripheral infusion device)
- Blood and blood products (checking client identification, monitoring infusion, responding to blood reactions)
- Catheterization
- Assessment and care of the mental health client
- Assessment and care of the post partum client
- Assessment and care of the newborn
- Individualizing nursing care plans across the lifespan
- Medication administration
- Pain management
- Immunization (theory/knowledge only)
- Context specific reporting and documentation

Learning Outcomes: upon successful completion of this course, within the simulated learning environment, the learner will be able to:

1. Demonstrate understanding of the Scope of Practice for LPNs, *Baseline Competencies for LPNs Professional Practice (2009)*, *Professional Standards of Practice for LPNs (2010)*, *Code of Ethics for LPNs (2004)* to guide practice.

2. Safely and competently perform comprehensive nursing assessment and interventions with clients experiencing mental illness.
3. Safely and competently perform comprehensive nursing assessment and interventions with maternal/child clients.
4. Safely and competently complete a point of care risk assessment related to infectious diseases.
5. Incorporate practice guidelines into decision making.
6. Demonstrate critical thinking, clinical judgment and knowledge of assessment to plan, implement and evaluate care of clients across the lifespan.
7. Practice in collaboration with clients, the interprofessional healthcare team, peers and faculty.
8. Provide a caring environment for clients by connecting, sharing and exploring with them in a collaborative relationship.
9. Provide person-centered care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity.
10. Identify own values, biases, and assumptions as a self-reflective, responsible and accountable practitioner.
11. Identify own learning needs to enhance competence

Suggested Learning Activities:

- Have learners practice nursing assessments and interventions in the lab setting
- Use a variety of case studies to guide lab practice of assessment, communication and nursing skills, particularly with pediatric clients and post partum clients
- Use a complex case study to explore ways to do a comprehensive nursing assessment of a client experiencing mental illness
- Have learners reflect on their learning after each class to integrate a self-reflective approach to their practice.
- *Engage in collaborative activities to gain appreciation of traditional knowledge in health and healing

Suggested Assessments:

- Exam – multiple choice and short answer questions to assess understanding of theory
- Self Reflection Assignment – have learners complete an assessment of their own performance in this course addressing each learning outcome as well as how they are meeting the CLPNBC Professional Standards of Practice for LPNs
- Integrated Lab Assessment – have learners perform a randomly selected case study in the lab. This strategy allows the learner to integrate the theory into practice and to demonstrate understanding and application of professional communication skills, nursing assessment and nursing interventions appropriate to the mental health, maternity or pediatric setting

Suggested References/Resources:

- Fundamentals of nursing textbook
- Pharmacology textbook
- Drug Guide
- Diagnostic reference guide
- Medical/surgical nursing textbook
- Mental health nursing textbook
- Pediatric textbook
- Maternal-child health textbook
- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)
- CLPNBC Code of Ethics for LPNs (2004)
- Violence www.phsa.ca
- Clinical Practice Guidelines from appropriate health authority

COURSE OUTLINE: INTEGRATED NURSING PRACTICE 4 (180 HOURS)

Course Description: this course emphasizes the development of nursing skills aimed at promoting health and healing with individuals experiencing acute health challenges across the lifespan. A variety of approaches (e.g., simulation) will help learners build on theory and practice from Levels 1, 2, and 3 to integrate new knowledge and skills relevant to the acute care setting.

Pre-requisites: Successful Completion of Level 3 courses and Consolidated Practice Experience 3.

Co requisites: Professional Communication 4; Professional Practice 4; Variations in Health 4, Health Promotion 4.

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Comprehensive holistic health assessment
- Clinical decision making
- Nursing interventions with clients experiencing acute illness
 - Continuous bladder irrigation
 - Risk management
 - Principles of infection control
 - Remove sutures, staples and drains, insert and remove packing
 - IV therapy II (converting IV to an intermittent infusion device, flushing an intermittent infusion device, discontinuing a peripheral infusion device)
 - IV insertion – theory/knowledge only
 - Blood and blood products (checking client identification, monitoring infusion, responding to blood reactions)
 - Initiation of blood and blood products – theory/knowledge only
 - Maintaining, and removing nasogastric tubes
 - Inserting nasogastric tubes – theory/knowledge only
 - Management of chest tubes, epidural catheter, drainage tubes, suprapubic catheter, tracheostomy, ostomy
 - Care of the medical/surgical client
 - Individualizing nursing care plans in acute care setting
- Medication Administration
 - Acute pain management
 - IV medication administration – theory/knowledge only
- Reporting and documentation in the acute care setting

Learning Outcomes: upon successful completion of this course, within the simulated learning environment, the learner will be able to:

1. Apply the Scope of Practice for LPNs, *Baseline Competencies for LPNs Professional Practice (2009)*, *Professional Standards of Practice for LPNs (2010)*, *Code of Ethics for LPNs (2004)* and how these guide the practice of LPNs in acute care settings.
2. Perform comprehensive nursing assessment and interventions with clients experiencing acute illness.
3. Apply critical thinking, clinical judgment and knowledge of assessment to plan, implement and evaluate care of clients experiencing acute illness.
4. Practice in collaboration with clients, the interprofessional healthcare team, peers and faculty.
5. Provide a caring environment for clients by connecting, sharing and exploring with them in a collaborative relationship.
6. Provide person-centered care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity.
7. Identify own values, biases, and assumptions as a self-reflective, responsible and accountable practitioner.
8. Identify own learning needs to enhance competence.

Suggested Learning Activities:

- Have learners practice nursing assessments and interventions in the lab setting.
- Use case studies to guide lab practice of assessment, communication and nursing skills of clients experiencing acute illness.
- Use case studies to explore ways to do comprehensive nursing assessments of a client experiencing acute illness.
- Have learners reflect on their learning after each class to continue to develop a self-reflective approach to practice
- Provide opportunities for interprofessional learning and practice
- Provide simulation opportunities in preparation for acute care experience
- *Engage in collaborative activities to gain appreciation of traditional knowledge in health and healing

Suggested Assessments:

- Quizzes
- Formative skill assessment
- Comprehensive final exam
- Integrated Lab Assessment – have learners perform a randomly selected case study in the lab. This strategy allows the learner to integrate the theory into practice and to demonstrate understanding and application of professional communication skills, nursing assessment and nursing interventions appropriate to the acute care setting.

- Self Reflection Assignment – have learners complete an assessment of their own performance in this course addressing each learning outcome. This could include a goal setting assignment early in the course and a final self-evaluation at the end.

Suggested References/resources:

- Fundamentals of nursing textbook
- Pharmacology textbook
- Drug Guide
- Diagnostic reference guide
- Medical/surgical nursing textbook
- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)
- CLPNBC Code of Ethics (2004)
- CLPNBC Practice Guideline: Documentation
(http://www.clpnbc.org/content_images/documents/Documentation%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Medication Administration
(http://www.clpnbc.org/content_images/documents/Medication%20Administration%20PG_rev.%20092310.pdf)
- CLPNBC Practice Guideline: Blood and Blood Product Transfusion Therapy
(http://www.clpnbc.org/content_images/documents/Blood%20%20Blood%20Product%20Transfusion%20Therapy%20PG_rev.092310.pdf)
- CLPNBC Practice Guideline: Peripheral Infusion Therapy
(http://www.clpnbc.org/content_images/documents/Peripheral%20Infusion%20Therapy%20PG_rev.%20092310.pdf)

CONSOLIDATED PRACTICE EXPERIENCES

Background

Learners may proceed to the Consolidated Practice Experience (CPE) after successful completion of the Integrated Nursing Practice course and all other theory courses at each level.

The Consolidated Practice Experience (CPE) refers to the essential, hands on, or direct patient care experiences required for learners to meet the baseline competencies for nursing practice. These courses are levelled to support the progressive development of nursing practice. The learner will bring forward previously gained experiences and be introduced to new client foci and context at each level. The CPE experiences will be evaluated based on a laddering of the Baseline Competencies throughout all four levels and reflected in the evaluation tools. The CPE I, II and IV experiences are to be faculty supervised (direct). CPE 3 will be optimally faculty supervised (direct) and could be faculty supervised (monitored) if students are paired with a qualified practitioner in a community practice experience.

While recognizing there may be various approaches to how CPEs are implemented, the recommended approach is that of block experiences. A block practice experience gives learners an opportunity to consolidate their learning. During a block practice experience, learners can immerse themselves in the work world without being distracted by the demands of other course requirements. Block practice experiences allow students to begin to make the transition from the learner to the Practical Nurse role.

Focus of Consolidated Practice Experiences

In **CPE 1**, the focus is on the “healthy client” and becoming comfortable with the relational aspects of nursing, learning the role of the Practical Nurse and becoming more confident with assessments, personal care and beginning medication administration skills. This faculty led experience is 90 hours in a variety of areas including Residential Care.

In **CPE 2**, the focus is on the ageing adult and clients experiencing chronic illness. The learner will encounter clients with more complex health challenges requiring comprehensive health assessment, medication administration and chronic wound management. This faculty supervised experience is 120 hours in Residential or multilevel care.

The above needs to be turned into the focus of CPE 2

In **CPE 3**, the focus is on the role of the Practical Nurse within a continuum of care in a variety of community settings. The continuum of care will provide the learner with an opportunity to integrate and apply previous knowledge in community based settings including home health care, rehabilitation agencies, and supportive services such as community living and disabilities.

These hours may be offered as CPE 3 or integrated into the Integrated Nursing Practice 3 course as practice hours. This faculty supervised or monitored experience is 65 hours.
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In **CPE 4**, the role of the Practical Nurse in acute care is emphasized. Learners will focus on exacerbations of chronic illness and/or presentations of acute illness, and will consolidate skills such as post operative care, surgical wound management, IV therapy and focused assessment. This faculty supervised experience is 200 hours

Final Practice Experience

The final practice experience (FPE) is an individualized, faculty monitored practice experience that offers an opportunity for the learner to consolidate knowledge and skills in preparation for entry to practice and to be *practice ready*. Historically, schools of nursing have used a preceptorship model for this final experience, but more recently a collaborative learning unit model has been made available in some regions. Other models of practice experience could also be considered.

In a preceptorship model, the learner is under the immediate supervision of a single, fully qualified individual, and monitored by the faculty. This may be an experienced LPN or in some cases, a Registered Nurse (RN) or Registered Psychiatric Nurse (RPN) with knowledge of the LPN scope of practice. The RN/RPN must be familiar with the LPN role expectations set by the employer, and understand the LPN role description so that they can reference that to the learner's actual performance, and provide feedback to the educational institute. The RN/RPN must also understand the educational preparation of the learner and the baseline competencies and standards of practice set by CLPNBC. It is particularly helpful if the RN/RPN has actually worked with LPNs in their own practice (CLPNBC, 2011).

A collaborative learning unit (CLU) is a practice education alternative to preceptorship.

In the CLU model, learners practice and learn on a nursing unit, each following an individual set rotation and choosing their learning assignment (and therefore the Licensed Practical Nurse with whom they partner), according to their learning plans. Unlike the traditional one-to-one preceptorship, an emphasis is placed on learner responsibility for self-guiding, and for communicating their learning plan with faculty and clinical nurses (e.g., the approaches to learning and the responsibility they are seeking to assume). All nursing staff members on the Collaborative Learning Unit are involved in this model and, therefore, not only do the learners gain a wide variety of knowledge, but the unit also has the ability to provide practice experiences for a larger number of students (Lougheed & Galloway, 2005).

COURSE OUTLINE: CONSOLIDATED PRACTICE EXPERIENCE A (120 hrs)

Course Description: This clinical experience provides learners with the opportunity to integrate theory from the Access level into practice. Learners will practice with ageing clients and/or those with chronic illness in residential care settings. Medication administration, nursing care, organization, comprehensive health assessment, wound care and introduction to leadership are emphasized in this course.

This is a hands-on direct patient care experience supervised by faculty. The Level A competencies are practiced and mastered.

Pre-requisites: NURS 2101 -Professional Communication A; NURS 2102 - Professional Practice A; NURS 2103 - Health Promotion A; NURS 2104 - Variations in Health A; NURS 2105 - Pharmacology A; and NURS 2106 - Integrated Nursing Practice A

Course Concepts:

Learning Outcomes:

1. Practice within relevant legislation, Baseline Competencies, Scope of Practice, Standards of Practice and Code of Ethics as set out by the CLPNBC, the Health Professions Act, and facility specific policy and procedures
2. Apply the definition of consent in providing safe, competent, culturally safe and ethical care
3. Demonstrate critical thinking, clinical judgement and knowledge of assessment to plan, implement, and evaluate care of older adults with assistance as required
4. Apply the nursing process to a variety of health challenges in the residential care setting
5. Demonstrate consistent client specific decision making that considers client acuity, complexity, variability, and available resources
6. Demonstrate a collaborative approach with other members of the health care team to meet the collective needs of older adult clients
7. Provide a caring environment for patients by connecting, sharing and exploring with them in a collaborative relationship
8. Deliver person-centred care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity
9. Demonstrate various communication strategies in communicating with clients with cognitive, sensory and/or mental health disorders
10. Collaborate with faculty to provide leadership, direction, assignment, and supervision of unregulated care providers in the complex care setting
11. Advocate for change reflecting evidence-informed practice

Suggested Learning Activities:

Suggested Assessments:

- Journal – have learners reflect about their client by preparing a journal
- Self-Evaluation – have learners reflect on their progression meeting each of the learning outcomes
- Instructor Evaluation ; -feedback based on each learning outcome
- Nursing Care Plan – learner prepare a written nursing care plan for each client
- Leadership – have learners develop a teaching pan about a care issue. Learners deliver plan and lead post conference

Suggested References/Resources:

- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)
- CLPNBC Practice Guideline: Documentation. • CLPNBC Practice Guideline: Duty to Report
- CLPNBC Practice Guideline: Medication Administration, • CLPNBC Practice Guideline: Duty to Provide Care
- CLPNBC Practice Guideline: Working with UCPs

COURSE OUTLINE: CONSOLIDATED PRACTICE EXPERIENCE 3 (65 HRS)

Course Description: this practice experience will introduce learners to community care settings and an opportunity to apply and adapt knowledge gained in Levels, 2, and 3 within a continuum of care for clients across the lifespan. Learners may gain experience through simulation and in a variety of community and residential care agencies and settings.

Note: These hours may be offered as CPE 3 or integrated into the Integrated Nursing Practice 3 course as practice hours.

Pre-requisites: Professional Communication 3; Professional Practice 3; Variations in Health 3; Health Promotion 3; Integrated Nursing Practice 3.

Co-requisites: None

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Professional communication
- Nurse-client relationship
- Comprehensive assessments across the lifespan
- Inter-professional approach to care
- Ethical practice
- Wellness and health promotion
- Nursing care and documentation
- Self-reflective approach to practice

Learning Outcomes: upon successful completion of this course, and with input from the interprofessional health team and faculty guidance, the learner will be able to:

1. Practice within relevant legislation, Baseline Competencies, Scope of Practice, Standards of Practice and Code of Ethics as set out by the CLPNBC, the Health Professions Act and facility specific policy and procedures.
2. Incorporate health promoting strategies to provide safe, competent, and ethical care to clients in community
3. Apply critical thinking, clinical judgment and knowledge of assessment to plan, implement, and evaluate care in providing a continuum of care for predictable situations.
4. Participate in collaborative practice decisions that are client specific and consider client acuity, complexity, variability, and available resources in a supervised practice setting.
5. Facilitate and participate in interprofessional problem solving and decision making.
6. Describe an interprofessional approach to supporting a client in community.

7. Participate with the health care team to meet the collective needs of clients.
8. Connect, share and explore in collaborative relationships with clients in a caring community environment.
9. Provide client-centered care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity as appropriate.
10. Provide leadership, direction, assignment, and supervision of unregulated care providers within the context of community care with direction as appropriate
11. Identify how evidence informed decision making can advocate change in the community setting
12. Identify how interactions with clients and other members of the health care team in community are influenced by own biases, values and assumptions.
13. Participate in continuous learning opportunities to maintain and enhance competence.
14. Recognize and respect the roles and ability of other members of the health care team in the community setting.
15. Recognize changes in client status and collaborate with other members of the health care team to develop a plan of care.
16. Identify own values, biases, and assumptions on interactions with clients and other members of the health care team.

Suggested Learning Activities:

- Assign a variety of client scenarios to each learner, to work with clients with various backgrounds, diagnoses, etc.
- Research into pertinent diagnosis in writing and verbalize findings to faculty
- Prepare a time plan for each to work on organization and time-management skills (if in community setting).
- Simulated lab practice using case scenarios, including ethical dilemmas and clients with behavioural changes and manipulative behaviour

Suggested Assessments:

- Journal – learners reflect on their learning about their client by preparing a journal.
- Simulated lab assessment based on a number of scenarios
- Self-Evaluation Assignment – have learners reflect on their progress in meeting each of the learning outcomes.
- Faculty-Evaluation/feedback based on learning outcomes
- Nursing Care Plan Assignment – have learners prepare a written nursing care plan for each client (either simulated or in the clinical setting)

Suggested References/Resources:

- Basic nursing textbook
- Pharmacology textbook
- Drug handbook

- Maternal child text
- Mental health text
- DSM IV-access to a copy

COURSE OUTLINE: CONSOLIDATED PRACTICE EXPERIENCE 4 (200 HOURS)

Course Description: this practice experience provides learners with the opportunity to integrate theory from all courses into the role of the Practical Nurse in the acute care setting and other practice areas as appropriate. Learners will focus on clients with exacerbations of chronic illness and/or acute illness across the lifespan and will consolidate knowledge and skills such as: post operative care, surgical wound management, intravenous therapy, focused assessment, and clinical decision-making in acute care settings.

Pre-requisites: Professional Communication 4; Professional Practice 4; Variations in Health 4, Health Promotion 4; Integrated Nursing Practice 4.

Co requisites: None

Course Concepts: Course outcomes will be met through examination and exploration of the following:

- Leadership
- Professional communication
- Clinical decision making
- Inter-professional approach to practice
- Comprehensive and focussed assessments
- Medication administration
- Surgical wound care
- Discharge planning
- Self-reflective approach to practice

Learning Outcomes: upon completion of this course and with input from the health care team and faculty guidance, learners will be able to:

1. Practice within relevant legislation, Baseline Competencies, Scope of Practice, Standards of Practice and Code of Ethics as set out by the CLPNBC, the Health Professions Act and facility specific policy and procedures.
2. Provide safe, competent, and ethical care to clients experiencing medical or surgical challenges
3. Independently apply critical thinking, clinical judgment and knowledge of assessment to plan, implement, and evaluate the agreed upon plan of care for stable post operative or medical clients across the lifespan
4. Independently implement nursing interventions and make practice decisions that are client specific and consider client acuity, complexity, variability, and available resources.
5. Recognize and respect the roles and ability of other members of the health care team in the acute care setting.

6. Recognize changes in client status and collaborate with other members of the health care team to develop a plan of care
7. Provide a caring environment for clients and families by connecting, sharing and exploring with them in a collaborative relationship.
8. Deliver person-centered care that recognizes and respects the uniqueness of each individual and is sensitive to culture and diversity.
9. Demonstrate teaching and learning through a continuum of care and discharge planning
10. Provide leadership, direction, assignment, and supervision of unregulated care providers in the acute care setting.
11. Advocate for and lead change reflective of evidence-informed practice.
12. Identify own values, biases, and assumptions on interactions with clients and other members of the health care team
13. Seek out and engage in continuous learning to maintain and enhance competence.

Suggested Learning Activities:

- Assign a variety of clients to each learner, allowing them to work with clients with various backgrounds, medical/surgical diagnoses, etc.
- Prepare a time plan for each shift in order to work on organization and time-management skills.
- Provide written research on pertinent diagnoses and verbalize to faculty
- Take turns being the student team leader. This provides them with an opportunity to practice leading their group of peers, including post-conference.
- Identify opportunities for interprofessional practice

Suggested Assessments:

- Journal – reflect on learning about the client by preparing a journal.
- Self-Evaluation Assignment – reflect on learner progress in meeting each of the learning outcomes.
- Faculty evaluation/feedback related to each learning outcome
- Nursing Care Plan Assignment – prepare a written nursing care plan for each client.
- Leadership Assignment – have learners develop a teaching plan in collaboration with other health care team members. Learner to deliver this teaching plan with their peers while using principles of teaching and learning

Suggested References/Resources:

- Basic nursing textbook
- Pharmacology textbook
- Drug handbook
- CLPNBC Professional Standards of Practice for LPNs (2010)
- CLPNBC Baseline Competencies for LPNs Professional Practice (2009)

- CLPNBC Practice Guideline: Documentation
(http://www.clpnbc.org/content_images/documents/Documentation%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Medication Administration
(http://www.clpnbc.org/content_images/documents/Medication%20Administration%20PG_rev.%20092310.pdf) CLPNBC Practice Guideline: Duty to Provide Care
(http://www.clpnbc.org/content_images/documents/Duty%20to%20Provide%20Care%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Duty to Report
(http://www.clpnbc.org/content_images/documents/Duty%20to%20Report%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Working with UCPs
(http://www.clpnbc.org/content_images/documents/Working%20with%20UCPs%20PG-%20092310.pdf)
- CLPNBC Practice Guideline: Blood and Blood Product Transfusion Therapy
(http://www.clpnbc.org/content_images/documents/Blood%20%20Blood%20Product%20Transfusion%20Therapy%20PG_rev.092310.pdf)
- CLPNBC Practice Guideline: Peripheral Infusion Therapy
(http://www.clpnbc.org/content_images/documents/Peripheral%20Infusion%20Therapy%20PG_rev.%20092310.pdf)

COURSE OUTLINE: TRANSITION TO PRECEPTORSHIP (30 HOURS)

Course Description: Transition to Preceptorship will prepare the learner for the final practice experience. simulation experiences and self directed learning will provide the learner with increased competence and confidence in their final practice experience.

Pre-requisites: Completion of all coursework and successful completion of Consolidated Practice Experience 4.

Co-requisites: none

Course Concepts:

- Student self evaluation of learning needs
- Preparation of learning plan appropriate to placement
- Review and practice of relevant knowledge, skills, and abilities
- Self reflective practice and leadership
- Review of interprofessional competencies
- Review of appropriate clinical practice guidelines
- Agency orientation and introduction to practice education model
- Simulated scenarios appropriate to selected area of practice

Learning Outcomes: upon successful completion of this course, within the simulated learning environment, the learner will be able to:

1. Develop a learning plan to be shared with mentors/Agency policies /preceptor in final practice experience.
2. Competently apply knowledge and skills relevant to the final practice experience.
3. Initiate, support, and develop respectful, supportive collaborative relationships in the practice environment
4. Be familiar with the established policies and procedures of agency where culminating practice education experience(s) will occur.
5. Describe the leadership role within role and responsibility of Practical Nurses.

Suggested Learning Activities:

- Simulation and lab-web based learning tools
- Self directed student learning

Suggested Assessments:

- Self/peer assessment of knowledge and skills specific to learner

COURSE OUTLINE: FINAL PRACTICE EXPERIENCE (180 HOURS)

Course Description: this final practice experience provides an opportunity for learners to demonstrate integration and consolidation of knowledge, skills, and abilities within the realities of the workplace, and become practice ready.

Note: This experience may occur through a variety of practice experience models, including the preceptorship model, under the immediate supervision of a single, fully qualified and experienced LPN or RN or RPN and/or within the context of a collaborative learning environment as a participating team member.

Pre-requisites: Completion of all course work and CPE 1, 2, 3, and 4. Transition to final practice course.

Learning Outcomes: upon successful completion of this course, with input from the interprofessional health team and faculty guidance, the learner will be able to:

1. Apply the *Baseline Competencies for Licensed Practical Nurses' Professional Practice (2009)* to provide safe, competent, culturally safe and ethical care.
2. Practice within relevant legislation, Scope of Practice, Standards of Practice and Code of Ethics as set out by the CLPNBC and the Health Professions Act.
3. Value and engage in continuous learning to maintain and enhance competence.
4. Practice in collaboration with other members of the health care team to meet the collective needs of their clients.
5. Participate in interprofessional problem solving and decision making processes.
6. Advocate for and facilitate change reflecting evidence-informed practice.
7. Make practice decisions that are client specific and consider client acuity, complexity, variability, and available resources.
8. Use critical thinking, clinical judgement and knowledge of assessment to plan, implement, and evaluate the agreed upon plan of care.
9. Develop a collaborative relationships with clients by connecting, sharing and exploring with them in a caring environment.
10. Provide person-centred care across the lifespan that recognizes and respects the uniqueness of each individual and is sensitive to cultural safety and diversity.
11. Provide leadership, direction, assignment, and supervision of unregulated care providers as appropriate.
12. Identify one's own values, biases, and assumptions on interactions with clients and other members of the health care team.

Suggested Assessments:

- Complete a journal to track their progress in final practice experience
- Regular and ongoing faculty communication with learner and mentor(s)
- Midterm and final written evaluations
- Learner self evaluation