# Graduate School of Nursing, Midwifery & Health Course Outline

# **NURS 552**

Specialty Knowledge and Practice;
Nursing assessment and management
across the lifespan

Acute care

Course Co-ordinator: Lyn Maughan





2006

# IMPORTANT NOTICE The Graduate School of Nursing, Midwifery & Health at Victoria University of Wellington, uses all reasonable skill and care in an effort to ensure the information and course content information contained in this outline is accurate at the time of going to print. Students should be aware, however, that in the event that course timetables and venues need to

be changed, all attempts will be made to notify the students.

Produced by Graduate School of Nursing, Midwifery & Health,

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81 Fairlie Tce, Kelburn, Wellington 6001.

# **CONTACT DETAILS**

### **COURSE COORDINATOR**

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### STUDENT ADMINISTRATOR

Abbey McDonald Graduate School of Nursing, Midwifery & Health

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# GRADUATE SCHOOL CONTACT DETAILS

### **POSTAL ADDRESS**

Graduate School of Nursing, Midwifery & Health Victoria University of Wellington P O Box 600 Wellington

### PHYSICAL ADDRESS

The Fieldhouse Centre Victoria University of Wellington 81 & 83 Fairlie Terrace Kelburn Wellington

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Email: nmh@vuw.ac.nz

Web site: http://www.vuw.ac.nz/nmh

Office Hours: Monday to Friday 8.30am to 5.00pm

### **COURSE AIMS**

This course aims to:

- extend the knowledge required for specialist nursing practice, and to produce nurses who are competent in providing high quality nursing care to patients and families experiencing complex, long-term health challenges.
- develop a practitioner who is analytical, reflective and who is able to apply theory and new ideas about practice to the clinical area.

### **COURSE OBJECTIVES**

Through specialist professional practice the nurse will:

- Act as a leader and change agent to promote effective nursing practice and optimum patient outcomes (3.2.2).
- Apply a sound evidence-based method of assessing, implementing and evaluating nursing care to meet the needs of the person with complex health challenges (3.2.1, 3.2.4).
- Examine economic, political, and social forces affecting nursing care delivery in complex health care systems (3.2.4.1 & 3).
- Provide care that reflects sensitivity to culturally and ethnically diverse populations (3.2.1.6, 3.2.4.3).
- Use ethical principles to guide decision-making in nursing practice (3.2.1).
- Integrate theoretical and research based knowledge into specialty nursing practice (3.2.1, 3.2.4).
- Contribute to the development of peers and colleagues to improve patient care and foster the growth of professional nursing (3.2. 2).
- Engage in interdisciplinary collaboration to promote quality cost effective care (3.2.2, 3.2.3).
- Evaluate clinical practice in relation to professional practice standards and relevant statutes and regulations (3.2.2, 3.2.3).
- Integrate a range of teaching methods into nursing practice to ensure patient outcomes are met (3.2.1).

The numbers in brackets reflect the requirements of the Nursing Council of New Zealand's four generic competencies for Specialty Nursing Practice.

Source: Nursing Council of New Zealand. (2001). <u>Framework for Post-Registration Nursing</u> Education. Wellington: Author.

# **COURSE CONTENT**

The course consists of clinical and theoretical components with the emphasis being on development of clinical expertise.

Students undertaking the course are drawn from a range of health care services and will be working as registered nurses in their specialist area during the course. The clinical environment is the key area for integrating new skills and knowledge into practice.

The course will run for 28 weeks, commencing **November 2006** and finishing in **February 2007.** 

### CLINICAL COMPONENT

There is a minimum requirement of 784 clinical hours to be worked during the course. This is equivalent to 0.7 of a full time position. If a student is not able to attain the required number of hours within the course period they will need to make up the deficit hours prior to graduation. Through the use of a portfolio the student will be assessed against the New Zealand Nursing Council's competency standards for specialty nursing practice (Nursing Council of New Zealand, 2001). These competencies are clinical judgement, leadership, standards, and practice development. The student will meet regularly and work closely with a nominated clinical mentor during the course to support their achievement of the required clinical competencies. A clinical mentor is an experienced competent practitioner who is familiar with the context of the student's practice. The relationship between the student and mentor supports the student to advance their practice by utilising critical reflection. Nomination of a clinical mentor will be negotiated by the student and the course co-ordinator within the first 2 weeks of the course.

### THEORETICAL COMPONENT

The theoretical component consists of Schools and tutorials. Schools are block courses designed to supplement students learning, provide time for study and access to staff for advice and guidance. Schools are a great opportunity to meet and mingle with colleagues to share ideas and strategies for learning, identify areas for change and benchmark your progress.

Schools and tutorials will provide a combination of general specialty nursing practice competency information and specialist area information and dates for these are included in this outline.

Students will be expected to attend all parts of the course well prepared to participate in, and from time to time, lead the discussion.

# TEACHING AND LEARNING STRATEGIES

The emphasis throughout the course will be on a student-centred approach to learning and teaching. Students will be encouraged to accept responsibility for their own learning within a supportive framework. Seminar presentations and group work will be utilised to build upon and enhance the students' skills and knowledge. A range of experts will be invited to speak on the course.

# **PRE-READINGS**

There are a wide range of resources available from MidCentral Health Centennial Clinical Library. They include: databases, journals (both print and electronic) and books. In addition Victoria University of Wellington (VUW) has an extensive nursing library and available data bases.

It is recommended that you have access to a good pathophysiology textbook for background reading. You will also need to search other sources for more relevant information specific to your own area of work. If the information/text you require is not available in the libraries, it may be accessed by interloan. Check with the librarians for details.

# RECOMMENDED READING/TEXT

There is no set text for this course however the co-ordinator will recommend texts as the course progresses. The following are a few suggestions about resource material.

### **Online Databases**

The MidCentral Health Centennial Library has on-line data bases including CINAHL, Ovid and Medline, as well as interloan facilities. There is also access to a large number of full-text nursing journals on-line - about 25 full-text nursing titles available through CINAHL and over 300 in Ebsco's Nursing & Allied Health Collection. All these, plus many more, are accessible through the A-Z database.

Library staff are more than happy to assist you in using any of the library resources.

It is important to be aware that some internet resources are not peer reviewed and need to be treated with caution.

### http://www.moh.govt.nz/moh.nsf

New Zealand Ministry of Health website, where you can easily have access to up-to-date information on New Zealand health.

### http://www.bmj.com

The British Medical Journal

### http://www.mic.ki.se/Diseases/index.html

The biggest link to diseases and disorder - teaching and tutorials.

### http://www.hrc.govt.nz

The New Zealand Health Research Council

### http://www.hdc.org.nz

The Health and Disability Commissioner promotes the rights and responsibilities of consumers and providers to resolve complaints by fair processes and credible decisions to achieve just outcomes.

### WORKLOAD

30 point courses in the Graduate School of Nursing, Midwifery & Health have an average workload of twelve hours per week.

# MANDATORY COURSE REQUIREMENTS

In order to successfully complete this course you are required to attend all Schools unless under special circumstances prior arrangements have been made with the course co-ordinator.

Students must submit and pass all pieces of assessment to satisfactorily complete the course.

# GENERAL UNIVERSITY REQUIREMENTS

Students should familiarise themselves with the University's policies and statutes, particularly the Assessment Statute, the Personal Courses of Study Statute, the Statute on Student Conduct and any statutes relating to the particular qualifications being studied; see the Victoria University Calendar available in hard copy or under 'About Victoria' on the VUW home page at www.vuw.ac.nz

### STAFF AND STUDENT CONDUCT

The Statute on Student Conduct together with the Policy on Staff Conduct ensure that members of the University community are able to work, learn, study and participate in the academic and social aspects of the University's life in an atmosphere of safety and respect. The Statute on Student Conduct contains information on what conduct is prohibited and what steps are to be taken if there is a complaint. For information about complaint procedures under the Statute on Student Conduct, contact the Facilitator and Disputes Advisor or refer to the statute on the VUW policy website at:

www.vuw.ac.nz/policy/studentconduct

The Policy on Staff Conduct can be found on the VUW website at:

www.vuw.ac.nz/policy/staffconduct

### **GRIEVANCE PROCEDURES**

If you have any academic problems with your course you should talk to the tutor or lecturer concerned. If you are not satisfied with the result of that meeting, see the Head of School or the relevant Associate Dean or Postgraduate Student Association (PGSA) representatives are available to assist you, including with advice or support, at any stage. If, after trying the above channels, you are still unsatisfied, formal grievance procedures can be invoked. These are set out in the Academic Grievances Statute which is published on the VUW website: www.vuw.ac.nz/policy/academicgrievances

# STUDENTS WITH IMPAIRMENTS

The University has a policy of reasonable accommodation of the needs of students with disabilities. The policy aims to give students with disabilities the same opportunity as other students to demonstrate their abilities. If you have a disability, impairment or chronic medical condition (temporary, permanent or recurring) that may impact on your ability to participate, learn and/or achieve in lectures and tutorials or in meeting the course requirements, please contact the course coordinator as early in the course as possible. Alternatively, you may wish to approach a Student Adviser from Disability Support Services (DSS) to discuss your individual needs and the available options and support on a confidential basis. DSS are located on Level 1, Robert Stout Building:

telephone: 463-6070

email: disability@vuw.ac.nz

The name of your School's Disability Liaison Person is in the relevant prospectus or can be obtained from the School Office or DSS.

# STUDENT SUPPORT

Staff at Victoria want students to have positive learning experiences at the University. Each faculty has a designated staff member who can either help you directly if your academic progress is causing you concern, or quickly put you in contact with someone who can. In the Faculty of Humanities and Social Sciences the support contact is Dr Allison Kirkman, Murphy Building, Room 407, Kelburn Campus. Assistance for specific groups is also available from the Kaiwawao Maori, Manaaki Pihipihinga or Victoria International.

In addition, the Postgraduate Student Association is available to provide a variety of support and services. Find out more at: <a href="www.vuw.ac.nz/pgsa/">www.vuw.ac.nz/pgsa/</a> or contact the Student Administrator at the Graduate School, Abbey McDonald ph 04 463 6144 or email: <a href="mailto:abbey.mcdonald@vuw.ac.nz">abbey.mcdonald@vuw.ac.nz</a>

# **SCHOOL TIMETABLE 2006-2007**

This course will run from November 2006 to February 2007. There are two schools and four tutorials.

WEEK STARTING	DATES	EVENT	VENUE/ACTION & TOPIC
Monday			
6 November	6 & 7 November	1 <sup>st</sup> School	Education Centre, Palmerston North Hospital
13 November			
20 November			
27 November	27 November		Part 1- Portfolio objectives and strategies due in
4 December	4 December	Tutorial 1 9am - 12 noon	Renal
11 December			
18 December	18 December	Tutorial 2 1 - 4.30pm	Respiratory: ABG Analysis Assessment 1 Case Study Due
25 December		<u>r</u>	
1 January			
8 January			
15 January	15 & 16 January	2 <sup>nd</sup> School	Assessment 2 - Student presentations due
22 January			•
29 January	29 January	Tutorial 3 1 - 4.30pm	Cardiac: ECG Recognition
		•	Part 2 Portfolio due
5 February			
12 February			
19 February	19 February	Tutorial 4 1 - 4.30pm	Traumatic Brain Injury Part 3 Portfolio due
26 February			Course Finishes

# 1<sup>ST</sup> SCHOOL TIMETABLE

Dates:	6 & 7 November 2006
Times:	0900 – 1630 hours
Venue:	Education Centre, Palmerston North Hospital
6 November	Day 1
0900 - 1030	Introduction
	Lyn Maughan, Course Coordinator, MidCentral DHB and
	Abbey McDonald, Student Administrator, GSNMH
	Victoria University of Wellington
1030 - 1045	Morning Tea
1045 - 1200	Virtual Library Tour
	Justin Cargill, Librarian, Victoria University of Wellington and MidCentral
	Health Library Staff
1200 - 1300	Lunch
1300 - 1400	Recognition and treatment of acute life threatening events
	o Predict
	o Prevent
	o Treat
	<ul> <li>Communicate</li> </ul>
	Steve Jenkins and Lyn Maughan (Simulation Lab)
1400 -1630	Assessing the critically ill patient
	<ul> <li>Immediate monitoring, assessment and treatment</li> </ul>
	<ul> <li>Airway, breathing, circulation, disability, exposure</li> </ul>
	Practical Demonstration
	Steve Jenkins and Lyn Maughan
7 November	Day 2
0900 - 1030	Managing the hypoxaemic patient : Assessment, Diagnoses, Planning,
	Implementation and Evaluation
	Lyn Maughan
1030 - 1045	Morning Tea
1045 - 1115	Managing the patient in pain
	Judy Leader
1115-1200	Managing the acutely ill patient with fluid and electrolyte imbalance
	(e.g. oliguria): Assessment, Diagnoses, Planning, Implementation and
	Evaluation
	Lyn Maughan
1200 - 1300	Lunch
1300 - 1400	Managing the hypotensive patient : Assessment, Diagnoses, Planning,
	Implementation and Evaluation
	Dr Rob Whitta
1400 - 1500	Communication skills in acute care: Silence Kills: Dialogue Heals
1700 1	Vanessa North
1500 - 1630	MidCentral Health Library

# 2<sup>ND</sup> SCHOOL TIMETABLE

Dates:	15 & 16 January 2007
Dates.	15 66 10 6411441 / 2007

**Times:** 0900 – 1630 hours

**Venue:** Education Centre Palmerston North Hospital

15 January	Day 1
0900 - 0915	Welcome
0915 - 1030	Student presentations x 2
1030 - 1045	Morning Tea
1045 - 1200	Student presentations x 2
1200 - 1300	Lunch
1300 - 1400	Student presentations x 1
1400 - 1630	Shock syndromes: SIRS, sepsis and septic shock

16 January	Day 2
0900 - 0915	Welcome
0915 - 1030	The patient with acute abdomen (e.g. Pancreatitis): Assessment, Diagnoses, Planning, Implementation and Evaluation
1030 - 1045	Morning Tea
1045 - 1200	Pharmacology in acute care
1200 - 1300	Lunch
1300 - 1400	Diabetes Management in acute care
1400 - 1500	Nutrition in Acutely Ill Patient
1500 - 1515	Afternoon Tea
1515 - 1630	Managing the patient in a coma

### **ASSESSMENTS**

Assessment information including grade descriptions, the procedures for submitting assessments and referencing information is available on the Graduate School's Website.

Assessment cover sheets are attached at the back of this course outline. Please ensure you complete an assessment cover sheet and attach it to the front of each assessment you submit to the **course co-ordinator**, **Lyn Maughan**.

The Graduate School of Nursing, Midwifery & Health has set a number of assessment tasks and due dates to best meet the outcomes of the course. In keeping with the Graduate School's stated philosophy, that no assessment work shall serve the Graduate School alone, it is possible to negotiate alternative assessments and schedule. This should be undertaken in consultation with the course co-ordinator.

### Graduate School Guidelines for Submission and Return of Student Assessments:

- 1. All assessments are to be submitted to the Lyn Maughan, course co-ordinator by 5.00pm on the nominated due date.
  - 1.1 An extension to the due date may only be given in exceptional circumstances. Such circumstances would typically be sickness (as evidenced by a medical certificate) or bereavement.
  - 1.2 Application for an extension must be made to the course co-ordinator at least 24 hours before the due date.
  - 1.3 Course co-ordinators may grant an extension of up to 2 weeks.
  - 1.4 Any extension requested for longer than 2 weeks must be agreed to and signed off by the Teaching and Learning Co-ordinator or in her absence, the Head of School.

### 2. Dean's extensions

- 2.1 are available in exceptional circumstances for only the final piece of assessment in any course.
- 2.2 must be applied for in writing at least 48 hours prior to due date.
- 2.3 may be approved for up to 4 weeks by the Teaching and Learning Co-ordinator with the appropriate documentation provided.
- 2.4 may be extended beyond 4 weeks with written approval by, and an interview with, the Teaching and Learning Co-ordinator.
- 3. Student coursework assessments submitted by the due date will be returned with feedback within **four weeks** of the due date.
- 4. Students who do not submit each piece of assessment within this framework may be subject to delays in their assessment being returned and may not receive comprehensive feedback.

- 5. Assessments which are late without an extension having been granted, and which remain outstanding for two weeks without due cause beyond the due date will be marked, but cannot attract a grade higher than a 'C' (pass) grade.
- 6. Assessments which remain outstanding for four weeks without due cause beyond the due date, will attract an 'E' (overall fail) grade.

### Final assessments will not be accepted by email.

Students must submit and pass all pieces of assessment to satisfactorily complete the course.

# **ACADEMIC INTEGRITY AND PLAGIARISM**

Academic integrity is about honesty – put simply it means no cheating. All members of the University community are responsible for upholding academic integrity, which means staff and students are expected to behave honestly, fairly and with respect for others at all times.

Plagiarism is a form of cheating which undermines academic integrity. Plagiarism is prohibited at Victoria.

### The University defines plagiarism as follows:

Plagiarism is presenting someone else's work as if it were your own, whether you mean to or not.

'Someone else's work' means anything that is not your own idea, even if it is presented in your own style. It includes material from books, journals or any other printed source, the work of other students or staff, information from the Internet, software programmes and other electronic material, designs and ideas. It also includes the organization or structuring of any such material.

### Plagiarism is not worth the risk.

Any enrolled student found guilty of plagiarism will be subject to disciplinary procedures under the Statute on Student Conduct (www.vuw.ac.nz/policy/studentconduct) and may be penalized severely. Consequences of being found guilty of plagiarism can include:

- an oral or written warning
- suspension from class or university
- cancellation of your mark for an assessment or a fail grade for the course.

Find out more about plagiarism and how to avoid it, on the University's website at: www.vuw.ac.nz/home/studying/plagiarism.html

When developing all assessments carefully consider issues of confidentiality, your professional code of ethics, the Privacy Act and the policy of your place of practice. If any work is to be used beyond the coursework purposes specified, informed consent from the persons and organisations involved is required.

When writing consider the following guidelines that assist, but do not completely resolve the issues of protecting information:

- Change names, identifiable features of people, location, specific workplace etc.
- Avoid revealing details that are not necessary to the main point of your exploration, eg., details of family members that are not necessary to the discussion, an unusual diagnosis or problem that is not related to the central facet of your work.

### ASSESSMENT NUMBER ONE

**Assessment Name:** Case Study Report

Due Date: 18 December 2006

Word Guide: 4000 words - Case Study Report (Written)

This assessment is worth 40% of your final grade.

This case study should demonstrate your theoretical knowledge and its integration with specialty nursing practice.

### **Case Study**

In this assessment you are required to present a written case study; in a formal essay format, regarding aspects of a patient's care.

This assessment will allow you to identify an area of practice that is of interest to you and is relevant to your own clinical environment. You will research issues related to the care of your patient and discuss those issues in relation to your own practice as a specialty nurse. You will be required to use relevant current literature, research and other resources.

This assessment should take the form of a formal academic essay and follow the American Psychological Association (APA) 5th edition referencing practice. Information on academic writing, researching and referencing will form part of your 1<sup>st</sup> School.

### **Learning Outcomes Assessed:**

### *Learning Outcome 1:*

Explores selected physiological concepts and mechanisms as it relates to acute care nursing

### Learning Outcome 2:

Correlates changes in major physiological systems with changes in parameters customarily monitored by acute care nurses.

### Learning Outcome 3:

Maximises adaptive and compensatory mechanisms through planned interventions.

### Learning Outcome 4:

Demonstrates ability to formulate clinical decisions based on clinical analysis through the assessment, diagnosis and planning process.

### *Learning Outcome 5:*

Provides evidence-based care to support best practice.

### Task:

- 1. Select a patient you have nursed who has encountered a severe physiological disturbance necessitating admission or prolonged length of stay to your acute care area.
  - a. Provide an overview of your case.
- 2. Explain the pathophysiological changes that have occurred in the body with this condition/disease.
  - a. What cells and tissues and organs are affected by this condition/disease?
  - b. What goes wrong with their structure and their function?
- 3. Through the process of clinical decision making demonstrate how patient diagnosis and management was made.
  - a. Discuss the assessments undertaken (including diagnostic/laboratory data) to support your patient diagnosis. Relate significant findings to the pathophysiological changes that have occurred
  - b. Describe the interventions used in the management of this patient, explaining the rationale for each.
- 4. Select one intervention and critically analyse the literature and research supporting (or not) the use of this in your patient management.
- 5. Summarise the relevance of the case study to your acute care nursing practice.

### MARKING CRITERIA FOR ASSESSMENT ONE

### STUDENT NAME:

Criteria	<b>Possible Points</b>	Points Earned
Provide an overview of selected case.	5	
Explain the relevant pathophysiology.	20	
Demonstrate decision making process showing sound analysis, clinical judgement and reasoning.	35	
Critically analysed relevance of one planned intervention	20	
Summarise the relevance of this case to acute care nursing practice.	10	
Assessment is supported by relevant citations in text and references from readings, research and other literature.	5	
APA form and style are used, incorporating presentation, grammar and spelling.	5	
	100 Points Possible	/100

LECTURER NAME:	
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### ASSESSMENT NUMBER TWO

Assessment Name: Presentation

Due Date: 15 January 2007 - 2<sup>nd</sup> School

Word Guide Maximum of fifteen slides

This assessment is worth 20% of your final grade

In the January School you will be expected to deliver a well organised (PowerPoint) 20 minute presentation with a maximum of fifteen slides. You will have an additional 10 minutes for questions and discussion about your presentation.

The presentation/teaching session will be developed from your case study assessment. The presentation should demonstrate your theoretical knowledge and its integration with specialty nursing practice.

Case Stud	ly Present	ation				
Title of Session:						
CRITERIA		RATI	NG and	d COM	IMEN	TS
Presentation	Disagr	ee				Agree
<ul> <li>encouragement of group participation</li> </ul>	0	1	2	3	4	5
<ul> <li>effective use of voice</li> </ul>	0	1	2	3	4 4	5
<ul> <li>tools used effectively</li> </ul>	0	1	2	3	4	5
<ul> <li>handling of questions</li> </ul>	0	1	2	3	4	5
Content						
<ul> <li>introduction and logical order</li> </ul>	0	1	2	3	4	5
<ul> <li>theoretical knowledge applied</li> </ul>	0	1	2	3	4	
<ul> <li>relevant to case study</li> </ul>	0	1	2	3	4	5
<ul> <li>appropriate language used</li> </ul>	0	1	2	3 3	4	
<ul> <li>stayed within allotted time</li> </ul>	0	1			4	
<ul> <li>summarised/question time</li> </ul>	0	1	2	3	4	5
	Total Nu	mber P	Points _			/50

### **Comments:**

Marker Name ......Date.....

### ASSESSMENT NUMBER THREE

Assessment Name: Specialty Practice Portfolio

Due Date: Part 1 – Portfolio objectives and learning strategies 27 November 2006

Part 2 – Summary of progress to date 29 January 2007

(part 1 and 2 combined are worth 10%)

Part 3 – Portfolio 19 February 2007 (30%)

Word Guide: approximately 1,500

This assessment is worth 40% of your final grade

Identify a Clinical Mentor from your specialty area of practice. Your mentor needs to be an experienced, practitioner who is willing to support you through the processes of this assessment. It is recommended that you meet with your mentor on a regular basis (fortnightly). Your time together will be valuable in establishing a reflective dialogue that will help to clarify learning objectives, the achievement of specific goals, and the critique of different learning situations that evolve throughout the course.

### **Learning Outcomes Assessed**

Learning Outcome 1:

Practice nursing in an acute care area as outlined by the NZNC standards for specialty nursing practice.

Learning Outcome 2:

Apply the nursing process in assuming responsibility for providing safe, organised care to a variety of clients in the acute care area.

Learning Outcome 3:

Establish effective communication for the situation and people involved.

Learning Outcome 4:

Competently demonstrate specific acute care skills.

Learning Outcome 5:

Utilise research findings from current literature as a basis for professional practice.

Learning Outcome 6:

Demonstrate critical thinking, clinical decision-making, independent judgement, and synthesis of the literature in planning and evaluating nursing care.

Learning Outcome 7:

Assume responsibility for continuing professional and personal development, including critical reflective feedback from peers and colleagues.

Learning Outcome 8:

Show a commitment to continuous quality improvement and quality audits.

Learning Outcome 9:

Contribute to development of policy, procedure and quality standards.

### Part One – Specialty Practice Portfolio objectives and learning strategies

At the beginning of the course carry out a self assessment of your practice using the *Specialty Practice Self Assessment Tool* (Appendix 1). Identify specific areas of practice in which you would like to advance your skills and knowledge. You need to present a list of your objectives and the learning strategies/resources which will help you achieve your objectives and the assessment criteria by which will measure the attainment of your objectives, using the *Specialty Practice Portfolio Template* (*Appendix 2*). Your objectives can be updated throughout the year and recorded on the *Specialty Practice Portfolio Template* (*Appendix 2*). The Practice Portfolio is a marked piece of work and needs to be submitted in November, 2006.

### Task 1 - Learning Agreement

Identify two specific areas of practice in which you would like to advance your skills and knowledge:

- 1. Clinical skill you would like to increase your ability and knowledge e.g. non-invasive ventilation, management of artificial airway (tracheostomy), haemodynamic monitoring arterial lines/CVP etc.
- 2. A practice policy/procedure or guideline or issue that you identify is in need of developing, reviewing or analysing in your clinical area e.g.tracheostomy care, enteral nutrition, humidification, oxygen therapy, visitation, patient information pamphlets, etc.

A learning agreement is a record of your proposed plan for self-directed learning. It allows you, the adult learner, flexibility in designing an individualised learning and assessment plan that meets your specific learning needs.

- 1. The learning objectives have been established (indicating a clear statement of what you need or want to know or be able to do).
- 2. The learning strategies and activities that you will undertake to meet learning objectives. Try to list several different processes and resources.
- **3.** The proposed time-line for the agreement, indicating the date when you expect to complete each of the steps in your learning agreement.
- **4.** The evaluation methods and materials to be submitted are the evidence you need to demonstrate that you have accomplished the learning objectives.

It is envisaged that these learning objectives can be used as evidence to validate some of your criteria to meet the four Specialty Practice Nursing Competencies (2001).

### Part One of your Clinical Portfolio: Due date 27 November 2006.

- The final draft of your two Learning Agreements to be submitted (a copy of these)
- A short description (500) words of who you are and your practice area
- Self assessment of your practice using the Specialty Practice Self Assessment Tool (Appendix 1).
- Proposed plan of Specialty Practice Portfolio objectives, learning strategies and how you will accomplish and validate these (using template).

### LEARNING AGREEMENT TEMPLATE

Name: Clinical Mentor:			
Agreement Title:			
Learning Objectives	Learning Strategies & Resources	Time-line	Evidence of Accomplishment and Validation
Jungan Cianatan		oto.	<u> </u>
	<b></b> D		

### Part Two – Summary of progress to date 29 January 2007

Complete your objectives and learning strategies/resources for your Specialty Practice Portfolio and record these in the *Specialty Practice Portfolio Template*. Summarise your progress to date using the *Specialty Practice Portfolio Summary Template* (*Appendix 3*). Discuss your progress with your Clinical Mentor, and ask them to complete the Clinical Mentor Assessment Form. You need to submit your summary of progress to date in January 2006. Part 1 and 2 of this assessment combined are worth 10% of your final grade.

### You need to submit:

- Specialty Practice Portfolio with completed objectives, learning stategies and how these will be accomplished and validated. (Specialty Practice Portfolio Template)
- Brief summary of your progress to date (use the Specialty Practice Portfolio Summary Template (Appendix 3).
- First Clinical Mentor Assessment Form

### **Task Two: Exemplar of Practice**

You are required to write one clinical exemplar outlining a patient care situation that is significant to you. This is an account of a real life situation, which allows you to illustrate the development of your specialty practice. It should reflect your development in the four Specialty Nursing Competencies

- Shows sound level of judgement, discretion and decision making in patient care
- Shows clinical nursing leadership
- Monitors and improves standards of nursing through quality improvement processes
- Develops nursing practice through research and scholarship.
- 1. **Decide on a situation to share**. (A situation where you feel your intervention really made a difference in patient outcome, either directly or through helping other staff members. A situation that you think captures the essence of what acute care nursing is all about. A situation that went well or one that did not go as well as planned).
- 2. **Set the Scene.** (What happened? Who was there? When did the situation arise? Share the clinical knowledge, judgement, decision making or clinical nursing leadership you used in the situation. Use a narrative style.)
- 3. How did you directly or indirectly make a difference to patient outcome? (Was the patient outcome influenced by your intervention, communication skills? Did any practice issues arise that required you to develop or improve practice? What did you find most satisfying about the situation.)

# Do not include names of persons or institutions or descriptions that are so specific that other persons may be identified

It is envisaged that this exemplar can be used as evidence to validate some of your criteria to meet the four Specialty Practice Nursing Competencies (2001).

### Part Three – Complete Practice Portfolio submission due 19 February 2007

Submit your Practice Portfolio that incorporates your identified objectives, the learning strategies/resources you have engaged to achieve these objectives, and evidence/validation of your practice development in respect to your identified evidence criteria. Take into account your reflections on your practice, the literature you have read, and the feedback you have been given on your practice and theoretical work. Your submitted practice portfolio should articulate the development of your scope of practice in relationship to the four Nursing Council of New Zealand Specialty Nursing Practice Competencies (2001).

Your specialty practice portfolio should include:

- Short description (500 words) of who you are and your practice area
- Two completed learning agreements with supporting evidence of accomplishment and validation.
- Exemplar of Practice (1,000 words)
- Specialty Self Assessment Tool (Initial and final assessments completed)
- Specialty Practice Portfolio Template with the supporting evidence of accomplishment and validation
- Clinical Mentor Assessment form (one and two)

This assessment will be discussed at the commencement of the course and throughout the programme. The template will be given to you in the 1<sup>st</sup> School.

### ASSESSMENT CRITERIA FOR CLINICAL PORTFOLIO

Task One: Learning Agreement						
	Ra	ting S	cale			
Learning Agreement				Learning Agreement		
does not contain:				contains:		
Learning Objectives	0	5	10	Learning Objectives		
Learning strategies	0	5	10	Learning strategies		
& resources				& resources		
A time-line	0	5	10	A time-line		
Evidence of accomplishment	0	5 10 1	5 20	Evidence of accomplishment and		
and validation				validation		

Task Two: Exemplar of Practice							
Rating Scale							
Exemplar does not				Exemplar does			
Describe a nursing	0	5	10	Describe a nursing			
situation				situation			
Sets the scene and uses	0	5	10	Sets the scene and uses			
A narrative style				a narrative style			
Shows clinical judgement,	0	5	10	Shows clinical judgement,			
knowledge & leadership				knowledge & leadership			
Describes outcome of	0 :	5 10	15	Describes outcome of			
situation				situation			

# ASSESSMENT CRITERIA FOR SPECIALTY PRACTICE PORTFOLIO NURS 552 Acute Care Practice

Stude	ent Name:	Date:				
Clini	cal Area:					
Lectu	arer responsible for assessment:					
	COMPETENCY ONE STANDARD: Shows sound levels of judgement, discretion and decision- making in patient/client care.					
PER	FORMANCE CRITERIA	RESU	ILT	COMMENTS		
1.1	Increasing clinical understanding and practice on which to assess and manage clinical situations;	□P	ΠI			
1.2	Effective health assessment skills;	□Р	□I			
1.3	Effectively performing technical nursing skills;	□P	ΠI			
1.4	Utilising specialty knowledge and experience to provide effective emotional and informational support to clients and families;	□Р	ΠI			
1.5	Foreseeing likely course of events for clients;	□P	□I			
1.6	Individualising client centred care beyond a routine approach to care;	□P	ΠI			
1.7	Further development of effective organisational skills such as time management and priority-setting.	□P	ΠI			

GRADE: P = Pass / Complete I = Incomplete

### **COMPETENCY TWO**

STANDARD: Shows clinical nursing leadership.

PER	FORMANCE CRITERIA	RESU	LT	COMMENTS
2.1	Actively participating in the health care team;	□Р	□I	
2.2	Being a positive role model of specialty nursing practice;	□Р	□I	
2.3	Providing a nursing resource for the health care team;	□Р	□I	
2.4	Effectively communicating with members of the interdisciplinary team;	□Р	ΠI	
2.5	Providing guidance, support and nurturing to novice nurses and those entering the specialty practice area;	□P	ΠI	
2.6	Being an advocate for nursing within the specialty practice area.	□Р	□I	

### **COMPETENCY THREE**

STANDARD: Monitors and improves standards of nursing through quality improvement processes.

PER	FORMANCE CRITERIA	RESU	LT	COMMENTS
3.1	Identifying researchable practice issues and referring to appropriate people;	□ P	ΠI	
3.2	Actively participating in quality improvement activities;	□ P	□I	
3.3	Contributing to the development of policies/audits/standards;	□ P	□I	
3.4	Giving and receiving critical and reflective peer feedback;	□P	□I	
3.5	Evaluating nursing practice against current standards through the use of nursing audit tools.	□P	ΠI	

GRADE: P = Pass / Complete I = Incomplete

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# COMPETENCY FOUR

STANDARD: Develops nursing practice through research and scholarship.

RESULT	COMMENTS
□Р□І	
□Р□І	
□Р □І	
□Р □І	
I = Incomplet	te
	Date:
	□ P       □ I         □ P       □ I         □ P       □ I         I = Incomplete

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# **APPENDICES**

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# APPENDIX ONE: Specialty Practice Self Assessment Tool (Template)

Spe	ed on Nursing Council of New Zealand Competencies for cialty Nursing Practice Programmes (May 2001)			Substantial compliance	Significant compliance	Partial compliance	Minimal compliance	Non-compliance	Not Applicable
1	Shows sound levels of judgement, discretion and	decis	sion making in p	atien	t cai	re			
a	Increases clinical understanding and practice on which to assess and manage clinical situations	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
b	Utilises effective assessment skills (physical and Psychosocial)	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
c	Performs technical skills effectively	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
d	Utilises speciality knowledge and experience to provide effective emotional and informational support to patients and families	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
e	Foresees likely course of events for patients	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
f	Individualises patient centred care beyond a routine approach to care	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
g	Further develops effective organisational skills, such as time management and priority setting	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a

2	Shows clinical nursing leadership								
	<u> </u>		T 1.1					_	,
a	Actively participates within the health care team	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
_	Acts as a positive role model of speciality nursing								
b	practice	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
c	Acts as a nursing resource for the health care team	i)	Initial assess.	1	2	3	4	5	n/a
	and the transparing a cooperation and transparent to the contract of the contr	,							11/60
		ii)	Final assess.	1	2	3	4	5	n/a
d	Effectively communicates with members of the	i)	Initial assess.	1	2	3	4	5	n/a
	interdisciplinary team	ii)	Final assess.	1	2	3	4	5	n/a
	Provide guidance, support and nurturing to novice	,							
e	nurses and those entering the specialty practice area	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
0		,							
f	Acts as a n advocate for nursing within the specialty practice area	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
3	Monitors and improves standards of nursing thr	ough	quality improve	men	t pro	ocess	ses		
a	Identifies researchable practice issues and refers to	i)	Initial assess.	1	2	3	4	5	n/a
	appropriate people	ii)	Final assess.	1	2	3	4	5	n/a
b		:)	Tuitial access	1	2	2	4	_	/
D	Actively participates in quality improvement activities	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
c	Contributes to the development of policies/audits	i)	Initial assess.	1	2	3	4	5	n/a
	and standards	ii)	Final assess.	1	2	3	4	5	n/a
		11)	Tillal assess.	1	2	3	4	3	II/a
d	Gives and receives critical and reflective peer feedback	i)	Initial assess.	1	2	3	4	5	n/a
		ii)	Final assess.	1	2	3	4	5	n/a
e	Evoluctor numerica practice against comment standard	i)	Initial assess.	1	2	3	4	5	n/a
	Evaluates nursing practice against current standards through the use of nursing audit tools	1)		1	۷	J	7	J	11/ A
		ii)	Final assess.	1	2	3	4	5	n/a

4	Develops nursing practice through research and scholarship								
a	Provides speciality nursing care which reflects current nursing knowledge, research and understanding		Initial assess.	1	2	3	4	5	n/a
			Final assess.	1	2	3	4	5	n/a
b	Utilises research and scholarship judiciously to critique clinical practice guidelines	i)	Initial assess.	1	2	3	4	5	n/a
	1	ii)	Final assess.	1	2	3	4	5	n/a
c	Develops awareness of the impact of broader health policies and directions on speciality practice	i)	Initial assess.	1	2	3	4	5	n/a
	position and assertation of speciality practice	ii)	Final assess.	1	2	3	4	5	n/a
d	Presents and participates in client review from a nursing perspective	i)	Initial assess.	1	2	3	4	5	n/a

ii) Final assess. 1 2 3 4 5 n/a

# APPENDIX TWO: Specialty Practice Portfolio Template

### 1 Shows sound levels of judgement, discretion and decision-making in patient/client care.

1.1 Increases clinical understanding and practice on which to assess and manage clinical situations.

Objective	Resources/strategies	Evidence of accomplishment/validation

1.2 Utilises effective assessment skills (physical and psychosocial).

Objective	Resources/strategies	Evidence of accomplishment/validation

1.3 Performs technical skills effectively.

Objective	Resources/strategies	Evidence of accomplishment/validation

1.4 Utilises specialty knowledge and experience to provide effective emotional and informational support to clients and families.

Objective	Resources/strategies	Evidence of accomplishment/validation

1.7 Further develops effective organisational skills, such as time management and priority setting.

Objective	Resources/strategies	Evidence of accomplishment/validation

### 2 Shows clinical nursing leadership.

2.1 Actively participates within the health care team

Objective	Resources/strategies	Evidence of accomplishment/validation

2.2 Acts as a positive role model of specialty nursing practice.

Objective	Resources/strategies	Evidence of accomplishment/validation

2.3 Acts as a nursing resource for the health care team.

Objective	Resources/strategies	Evidence of accomplishment/validation

2.4 Effectively communicates with members of the interdisciplinary team.

Objective	Resources/strategies	Evidence of accomplishment/validation

2.5 Provides guidance, support and nurturing to novice nurses and those entering the specialty practice area.		
Objective	Resources/strategies	Evidence of accomplishment/validation
2.6 Acts as an	n advocate for nursing within the specia	alty practice area.
Objective	Resources/strategies	Evidence of accomplishment/validation
	proves standards of nursing through	
	s researchable practice issues and refers	
Objective	Resources/strategies	Evidence of accomplishment/validation
3.2 Actively 1	participates in quality improvement ac	ctivities
Objective	Resources/strategies	Evidence of accomplishment/validation

3.3 Contributes to the development of policies/audits/standards.

| Objective | Resources/strategies | Evidence of accomplishment/validation |
| 3.4 Gives and receives critical and reflective peer feedback |
| Objective | Resources/strategies | Evidence of accomplishment/validation |

3.5 Evaluates nursing practice against current standards through the use of nursing audit tools.

Objective	Resources/strategies	Evidence of accomplishment/validation

Objective	Resources/strategies	Evidence of
Objective	Mesour cest ser accessos	accomplishment/validation
l		
r		
4.2 Utilises re	esearch and scholarship judiciously to	critique clinical practice guidelines.
Objective	Resources/strategies	Evidence of
Object. I		accomplishment/validation
	awareness of the impact of broader he	ealth policies and directions on
4.3 Develops specialty p		ealth policies and directions on
specialty p	practice.	
1		Evidence of
specialty p	practice.	
specialty p	practice.	Evidence of
specialty p	practice.	Evidence of
specialty p	practice.	Evidence of
specialty p	practice.	Evidence of
specialty p	practice.	Evidence of
specialty p	practice.	Evidence of
Specialty properties of the special sp	practice.	Evidence of accomplishment/validation
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.
Specialty properties of the special sp	Resources/strategies	Evidence of accomplishment/validation  a nursing perspective.  Evidence of
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.  Evidence of
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.  Evidence of
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.  Evidence of
Objective  4.4 Presents a	Resources/strategies  nd participates in client review from a	Evidence of accomplishment/validation  a nursing perspective.  Evidence of

Provides specialty nursing care which reflects current nursing knowledge, research

4. Develops nursing practice through research and scholarship.

and understanding.

4.1

# APPENDIX THREE: Specialty Practice Portfolio Summary Template

Provide a summative assessment of how your specialty practice is evolving for each criterion.

1	Shows sound levels of judgement, discretion and decision making in patient care
a	Increases clinical understanding and practice on which to assess and manage clinical situations
b	Utilises effective assessment skills (physical and psychosocial)
c	Performs technical skills effectively
d	Utilises specialty knowledge and experience to provide effective emotional and
u	informational support to clients and families
e	Foresees likely course of events for clients
f	Further develops effective organisational skills, such as time management and priority
1	setting
2	Shows clinical nursing leadership
a	Actively participates within the health care team

b	Acts as a positive role model of speciality nursing practice
	A - 4
c	Acts as a nursing resource for the health care team
d	Effectively communicates with members of the interdisciplinary team
e	Provides guidance, support and nurturing to novice nurses and those entering the specialty practice area
	specially practice area
f	Acts as an advocate for nursing within the speciality practice area
3	Monitors and improves standards of nursing through quality improvement process
a	Identifies researchable practice issues and refers to the appropriate people
b	Actively participates in quality improvement activities
c	Contributes to the development of policies/audits and standards

d	Gives and receives critical and reflective peer feedback
e	Evaluates nursing practice against current standards through the use of nursing audit tools
4	Develops nursing practice through research and scholarship
a	Provides speciality nursing care which reflects current nursing knowledge, research and understanding
b	Utilises research and scholarship judiciously to critique clinical practice guidelines
	Develops awareness of the impact of broader health policies and directions on specialty
c	practice
d	Presents and participates in client review from a nursing perspective
u	Tresents and participates in enent review from a nursing perspective