



**UNIVERSITY OF LETHBRIDGE
FACULTY OF HEALTH SCIENCES
NURSING 2125
Children and Families
(Health, Illness and Healing II)
Syllabus
Summer Session II/III 2011**

Theory Courses Coordinator: Peter Kellett, RN, MN
Office: 3117 Markin Hall
Telephone: 403-329-2643
E-mail: peter.kellett@uleth.ca

Instructor: Leslie McCoy, RN, BN, MN
Office: M3070
Telephone: 403-332-4415
E-mail: mccolr@uleth.ca
Office Hours: by appointment

Class/Lab Dates and Times:

Start date: July 4, 2010
End Date: August 17, 2010
Days: Monday & Friday
Class Time: 0900-1150
Class Room: M1035

Prerequisites: Completion of NURS 4511 and NURS 3125

Co-requisites: NURS 2255 Nursing Practice—Children and Families

Required Texts:

1. London, M. L., Ladewig, P. W., Ball, J. W., Bindler, R. C., & Cowen, K. J. (2011). *Maternal & child nursing care* (3rd ed.). Toronto, ON: Pearson.
2. Hartrick Doane, G., & Varcoe, C. (2005). *Family nursing as relational inquiry: Developing health-promoting practice*. Philadelphia: Lippincott Williams & Wilkins.
3. American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Recommended Texts and Materials:

Manual of laboratory and diagnostic tests
Drug guide

Textbooks and additional journal readings will be an integral part of the learning process in this class.

Course Description: *Credit hours: 3.0*

This course focuses on the experiences of child-bearing and child-rearing families with varied cultural backgrounds in diverse geographical settings. It integrates concepts of health promotion, illness prevention, epidemiology, pathophysiology, and therapeutics.

Course Outcomes:

Learners will:

1. Describe relationships between anatomy, physiology, microbiology and health assessment to the pathophysiology, epidemiology and assessment/management of common health issues encountered by children and families.
2. Exhibit knowledge of human growth and development and role transitions for children and families.
3. Explain application of primary health care concepts to the health and wellness of children and families.
4. Critique theoretical and practical knowledge of relational practice in nursing.
5. Demonstrate critical inquiry processes in retrieval of new knowledge and appraisal of evidence from a variety of sources that change, enhance or support child and family nursing practice.
6. Articulate the differences in nursing roles and the planning and implementation of nursing care for children and families with varied cultural backgrounds.
7. Apply teaching and learning principles during classroom presentations.
8. Demonstrate group process skills that support learning and promote understanding of key concepts, critical thinking and problem solving in group discussions.

Course Delivery Methods:

Students will engage with faculty, content experts, and peers in face to face classroom, and Moodle (online) environments. Active participation in inquiry based learning activities, along with independent and group work learning is required. Students will be guided to seek appropriate literature and resources in preparation for each class. In order to deepen understanding of maternal and child health, students will be required to engage in a variety of spoken and written learning activities.

The learning management system Moodle will be used to enhance learning and access to learning resources. Moodle requires students to have internet access, and the ability to retrieve and post articles and documents and links that pertain to the course.

Assignments and Evaluation:

All assignments must be completed in full according to the expectations outlined for each assignment. Students must meet GPA requirements as outlined in the Student Handbook (2010/11) to advance in the program.

General Guidelines for Assignments:

All written assignments are graded in accordance with APA sixth edition and Corrections to the First Printing of the Publication Manual of the American Psychological Association, Sixth Edition (July 2009). Assignments are due at the beginning of class on the stated Due Date.

Assignment/Activity/Exam List, Due Dates, and Value of Each:

| | Assignment/Activity/Exam | Due Date | Value |
|---|---------------------------------|--------------------------------|--------------|
| 1 | Concept Map | July 11 & August 12 | 15% |
| 2 | Family Centered Care Paper | July 18 | 20% |
| 3 | Quizzes | July 18 July 29 August 8 | 30% |
| 4 | Final Exam | August 15 | 20% |
| 5 | Participation - Self-Assessment | August 15 | 15% |

1. Concept Map 15% (See attached Rubric)

Concept Mapping is one approach that can be used to promote learning and critical thinking. It is a tool used to visually organize ideas and make relationships between them. Concept maps are centered around a key idea, in this case children and families, and link multiple ideas to them, thus creating relationships. The purpose of this assignment is to assist students in visualizing and understanding the complexity of child and family health. Consideration should be given to the influence of the determinants of health, the role of primary health care, and the impact of acute and chronic disease. This assignment will be completed in two parts.

Part 1 – Preliminary 5%

Complete a Concept Map with children and or family as the central idea. Brainstorm as many concepts and connections that influence child and family health. The preliminary concept map will provide a 'start point' for learning and will be revisited at the end of the course.

Part 2 – Final 10%

The preliminary concept map will be revised to include concepts and connections explored throughout the course. Information from theory and clinical experience may be included.

Each part of the Concept Map assignment will be marked using the rubric. Each mark will then be converted to a valued %.

Online Concept Mapping Tools

- Prezi: www.prezi.com
- Bubbl.us: <https://bubbl.us/>
- CMap Tools: <http://cmap.ihmc.us/>

2. Family Centered Care Assignment 20% (See attached Rubric)

The purpose of this assignment is to write a scholarly paper on Family Centered Care (FCC) in order to become familiar with the model and its application to nursing children and families.

Discuss the following:

- Definition of the Family Centered Care model
- Historical events influencing the development of the Family Centered Care model
- The core concepts inherent in the model. For each core concept discuss factors that may influence its application and give examples of how it may be applied to nursing.
- Support your discussion with scholarly literature (at least three journal articles in addition to the text).

Length: 5 page maximum

3. Quizzes 30%

Comprehensive quizzes are provided to evaluate understanding of basic concepts of child and family nursing, challenge critical thinking processes, and assess ability to apply knowledge gained. There will be **3** quizzes given in class. Quizzes will be closed book, completed individually during allotted class time. There will be no make-up quizzes except in the case of illness reported to the instructor prior to the exam and documented by a medical note.

4. Final Exam 20%

The final exam will be comprehensive and consist of multiple choice questions related to the topic areas discussed in class and completed in self-study. Basic concepts and principles of child and family nursing will be addressed in the exam.

5. Participation Self-Assessment 15% (See attached Rubric)

The nursing profession involves teamwork and collaboration; the same principles of participation apply to learning and the classroom environment. Students will complete a self-assessment of their participation in this course, including: preparation for class, contribution to learning, presence, respect for others, flexibility, accountability, engagement, peer feedback, and dedication to the group process.

Late Papers/Assignments:

All papers and assignments must be submitted by the beginning of class on the due date unless an alternate due date has been arranged with the faculty member in advance of the scheduled due date.

A late (date and/or time) paper or assignment will be assessed at five percent (5%) decrement for each day it is late, including holidays and weekends. All papers will be initially graded according to the assignment's original marking guideline, and then the mark will be reduced by 5 percentage points per day.

Assignments are to be submitted in paper and/or electronic format as stipulated by the course instructor.

If an assignment is to be submitted late and on a holiday or weekend, then an electronic copy should be submitted to the instructor as soon as possible. An identical paper copy must be submitted on the first working day following the holiday or weekend.

Plagiarism and Duplication Statements:

Using the work of others in assignments without appropriate recognition (citation) constitutes the academic offense of plagiarism and could result in a failing grade for the course (see University of Lethbridge 2010/2011 Calendar for further information).

The University of Lethbridge subscribes to Turnitin.com, a plagiarism detection service. Please be advised that student work submitted for credit in this course may be submitted to this system to verify its originality. Students must be able to submit both electronic and hard copy versions of their work upon request.

Grading Breakdown:

Students must complete all assignments, including full participation in classroom activities and group work, to pass this course. The grading system is consistent with that established in the Faculty of Health Sciences effective May 1, 2002.

| Letter | | GPA | Percent | Letter | | GPA | Percent |
|--------|-----------|-----|----------|--------|--------------|-----|----------|
| A+ | | 4.0 | 95-100% | C+ | | 2.3 | 71-74.9% |
| A | Excellent | 4.0 | 91-94.9% | C | Satisfactory | 2.0 | 67-70.9% |
| A- | | 3.7 | 87-90.9% | C- | | 1.7 | 63-66.9% |
| B+ | | 3.3 | 83-86.9% | D+ | | 1.3 | 59-62.9% |
| B | Good | 3.0 | 79-82.9% | D | Poor | 1.0 | 55-58.9% |
| B- | | 2.7 | 75-78.9% | F | Fail | 0 | 0-54.9% |

Attendance:

Attendance at all nursing theory classes is an expectation of the nursing program. Multiple absences may jeopardize a student's development of the knowledge-base required for competent professional nursing practice and successful completion of course requirements. As adult learners, students are ultimately responsible for their own learning; however, it is also recognized that repeated absences may have a negative impact on collaborative learning experiences.

NESA Attendance Policy Statements:

1. Unexcused absences are considered unprofessional conduct.
2. When an absence occurs (e.g., due to illness), it is the student's responsibility to notify their instructor/professor and student group members of their absence.
3. Students in group-based learning activities are responsible and accountable to their group members for their participation and attendance. Peer evaluations support individual accountability for contributions to group assignments and to participatory learning. Students are expected to demonstrate accountability and integrity in completing peer evaluations.
4. A Theory Enhancement Plan may be initiated by an instructor/professor for any student with repeated absences. A Theory Enhancement Plan is designed to support student success in meeting theory course requirements and outcomes.
5. Students are expected to complete all course components.

Student Athletics Participation and Nursing Student Attendance at Professional Conferences

The NESA BN programs acknowledge that some nursing students are members of their academic institution's official athletic teams, and may have obligations to these teams in order to maintain scholarships. All members of a University of Lethbridge or Lethbridge College athletic team who anticipate absence from theory or clinical course related to athletic commitments should discuss these potential absences with their instructor/professor at the initiation of the course to determine if these absences can be appropriately accommodated without impacting the student's ability to attain the course outcomes and required clinical hours. Please note that students on athletic teams must meet with an academic advisor at their institution to assist with course planning each semester and should attempt to register for courses so that their athletic commitments have the minimum impact on their academic commitments.

Official student delegates for professional nursing associations including the Canadian Nursing Students Association (CNSA) may be granted permission to attend official conferences/meetings during course

time as long as participation in these activities will not adversely interfere with their achievement of course objectives. Student delegates should discuss the potential absence with faculty at their earliest convenience to determine if permission to attend these events can be granted. Permission to attend conferences will not be granted for any student that is not demonstrating an appropriate level of clinical practice or who has a Practice Enhancement Plan in effect.

Accommodation for Students with a Disability:

Reasonable accommodations are available for students who have a documented disability. If you have been diagnosed with a disability, there is no need to face the challenge of University without support. Please contact the Counselling Services/Students with Disabilities Resource Centre at 329-2766 <http://www.uleth.ca/ross/counselling/index.html> to set up an appointment. After registering with the Disabilities Resource Centre, your instructor will be notified by a formal letter of any accommodations you require. In addition, students are responsible for requesting accommodations from the instructor at least ***two weeks*** in advance of the evaluation date. The instructor and student are jointly responsible for arranging the resources needed for the evaluation process.

**Nursing 2125 – Children and Families
Rubric: Concept Map**

| Total | | | | |
|---|--|--|---|---|
| 15 marks | | | | |
| | 3 | 2 | 1 | 0 |
| Organization _____ 2 marks | Extremely well organized. | Generally well organized. | Somewhat organized. | Poor or nonexistent organization. |
| | Effective, smooth, links between concepts. | Includes transitions between concepts. | Includes some transitions to link concepts but it is difficult to follow. | Uses ineffective transitions, rarely connecting concepts. |
| Content: Depth and Complexity _____ 10 marks | Accurate and complete connection of key concepts and or theories. Evidence based support included. | Some connection of key concepts and theory. No evidence based support is included. | Connection of key concepts and theory is inaccurate. Large amount of information presented is irrelevant. | Key concept and theory is unclear and information presented does not support information. |
| | Includes evidence based support from a variety of sources (at least 4) | Includes evidence based support from the same source (less than 4) | Presents support but not evidence based. | No supports included. |
| | Concept map illustrates complexity of child and family health. | Concept map illustrates some connections/links that influence child and family health. | Concept map illustrates basic connections in child and family health. | Concept map does not illustrate connections in child and family health. |
| APA _____ 2 marks | Consistent with APA format and citation guidelines. | | | Lack of adherence to APA format and citation guidelines |

Nursing 2125 – Children and Families
Rubric: Family Centered Care Paper

| Total <hr/> 100 marks | Minimum Marks ←----- Maximum Marks -----→ | | |
|---|--|---|---|
| Development of ideas in Introduction and Conclusion (10 marks) | Introduction does not provide direction for paper. Conclusion incomplete or not relevant. | Organization of discussion identified in introduction, but framework not fully developed in paper. Conclusion superficial | Organizational framework identified and developed throughout paper. Links between sections clearly identified. Conclusion summarizes and reflects on main issues in paper. |
| Description of the events/history leading towards development of the Family Centered Care model. (25 marks) | Incomplete or superficial descriptions of events/history leading to the development of FCC. Discussion lacks support from scholarly literature. | Basic description of events/history leading to the development of FCC. Literature support present and integrated. | Well developed description of events/history leading to the development of FCC. Discussion of influence of model on patient care. Literature supports discussion. |
| Discussion of the 4 core concepts of FCC. (40 marks) (Each core concept worth 10 marks) | Superficial discussion of the concepts. No examples of how Family Centered Care is applied. Lacks support from scholarly literature or inappropriate choice of literature. | Identifies the concepts of FCC but discussion of factors influencing application not well developed. Literature support present and integrated. Examples lacking in depth and direct application. | Provides well developed discussion of the application of the core concepts of FCC. Examples of FCC application discussed and well developed, references supplied. At least 3 articles from scholarly journals used and referenced. Literature supports concepts discussed in the paper and is well integrated. |
| Expression and Organization of ideas (20 marks) | Use of colloquial expressions (conversational language and slang). Incomplete sentence structure, spelling errors, incorrect usage of terms. | Minimal grammatical errors. Inconsistent clarity. Unnecessary wordiness at times. | No grammatical or spelling errors. Succinct, clear expression of ideas. |
| APA (5 marks) | Lack of adherence to APA guidelines. Less than 4 pages; more than 5 pages. | Inconsistent adherence to APA guidelines. | Consistent with APA format. Within maximum page limit. |

Nursing 2125 – Children and Families Rubric: Participation Self-Assessment

Name: _____
Student ID: _____

| Total _____ marks | | | | | |
|--|--|---|--|---|--|
| 5 | 4 | 3 | 2 | 1 | 0 |
| Actively supports, engages and listens to peers | Supports, engages and listens to peers | Makes a sincere effort to interact with peers | Limited interaction with peers | Virtually no interaction with peers | No interaction with peers |
| Arrives promptly, fully prepared at every session with readings and assignments completed | Arrives fully prepared at almost every session with readings and assignments completed | Arrives mostly, if not fully, prepared | Arrives late occasionally preparation, and therefore level of participation, are both inconsistent | Frequently arrives late and rarely prepared | Frequently misses classes and when present is never prepared |
| Plays an active, positive role in discussions | Plays an active role in discussions | Participates constructively in discussions | When prepared participates constructively in discussion and makes relevant comments based on the assigned material | Comments are generally vague or drawn from outside of the assigned material | Demonstrates a noticeable lack of interest in the material |
| Comments consistently advance the level and depth of the dialogue | Comments occasionally advance the level and depth of the dialogue | Makes relevant comments based on the assigned material | When prepared participates constructively in discussion and makes relevant comments based on the assigned material | On occasion demonstrates a noticeable lack of interest | Demonstrates a noticeable lack of interest in the material |
| Group dynamic and levels of discussion are consistently better because of the student's presence | Group dynamic and level of discussion are often better because of the student's presence | Group dynamic and level of discussion are occasionally better (never worse) because of the student's presence | Group dynamic and level of discussion are not affected by the student's presence | Group dynamic and level of discussion are harmed by the student's presence | Group dynamic and level of discussion are significantly harmed by the student's presence |

Pearce, B. (2003). *Effort and Participation Rubric*. Retrieved from [http://web.rbe.sk.ca/assessment/rubrics/Class Participation Rubric](http://web.rbe.sk.ca/assessment/rubrics/Class%20Participation%20Rubric). (n.d). Retrieved from <http://teachers.teach-nology.com/cgi-bin/classpar.cgi>
Classroom Participation Rubric (n.d). Retrieved from <http://chatt.hdsb.ca/~trojanovicm/TAG%20Learning%20Skill%20Rubrics/Class%20Participation%20Rubric.pdf?FCItemID=S011B6EDE>