

WESTERN CONNECTICUT STATE UNIVERSITY
Department of Nursing

Course Number: NUR 511

Course Title: Foundations of Clinical Nursing Practice

Credits: 3 S.H. (3hrs lecture)

Placement: FOUNDATIONAL CORE

Pre-requisites: None

Course Description:

The Advanced Practice Nurse (APN) role in relation to critical thinking in the design and delivery of nursing care services to clients from diverse settings. Incorporates diagnostic reasoning, development of clinical expertise, and application of theory to a range of clinical problems, including health promotion, disease prevention, and the physical and psychosocial management of acute and chronic health problems.

Student learning outcomes:

1. Explore commonalities and differences in APN roles.
2. Integrate the concept of diagnostic reasoning within the application of the nursing process with individuals, families, and communities from diverse communities.
3. Analyze diagnostic reasoning skills used in clinical nursing practice with acutely and chronically ill individuals.
4. Recognize the physiologic manifestations and effects of typical and atypical psychosocial responses to health and illness.
5. Analyze the domains of nursing, as described by Benner, with application to clients from diverse backgrounds.
6. Utilize an evidence based practice framework to evaluate professional literature for application to the care of clients from diverse backgrounds

Content Outline:

- I. Advanced Practice Nursing
 - A. History of Advanced Practice Nursing
 - B. Current APN roles
 - a. Educator roles
 - i. Factors affecting learning
 - ii. Teaching learning theories
 - b. Leadership/management roles
 - i. Leader or manager
 - ii. Leadership theories for practice
 - iii. Change theories for practice
 - c. Direct care roles
 - C. Commonalities across APN roles
 - D. Regulation of APN education and practice
 - a. American Association of Colleges of Nursing (AACN) Essentials for Graduate Education in Nursing
 - b. National Association of Clinical Nurse Specialists (NACNS)
 - c. National Organization of Nurse Practitioner Faculties
 - d. State regulatory bodies

- II. Nursing Diagnosis and Clinical Practice
 - A. Characteristics of diagnostic tasks in the Nursing domain
 - B. Interaction of environment, age, developmental tasks, and pathology
 - C. Interaction of culture, race, ethnicity, gender, and pathology
 - C. Theorists that serve as unifiers in the clinical area
 - a. Von Bertalanffy's systems theory
 - b. Martha Rogers
 - c. Holistic health models
 - d. Evelyn Duval
 - e. Developmental tasks of adulthood
 - f. Family theorists
 - i. The family as a system
 - 1. Impact of illness on the family related to social, cultural, and ethnic origins
 - 2. Family reactions to acute illness
 - 3. Family reactions to chronic illness
 - 4. Value orientation

- III. The Development of Diagnostic Reasoning in Nursing
 - A. The difference between practical and theoretical knowledge
 - B. Bloom's taxonomy of learning

- C. Nursing skill acquisition: How and when does it occur?
- D. Differences of novice and expert (Benner)
 - 1. Use of past experience as paradigm
 - 2. Teaching of competency
 - 3. Analysis of diagnostic elements that speed the transition from novice to expert
 - 4. Dreyfus and Dreyfus model of skill acquisition
 - 5. Benner's *Novice to Expert* framework
 - 6. The domains of Nursing

- IV, Measuring Professional Growth from Novice to Expert
 - A. Concurrent
 - B. Retrospective
 - C. Transitioning to APRN role
 - D. Creating a professional development plan

- V. Use of Research Findings to Improve Nursing Care
 - A. The movements towards Evidence Based Practice
 - B. Analyzing the literature using
 - 1. AHCPR guidelines
 - 2. US Preventive Health Task force guidelines for Evidence Based Practice
 - 3. Iowa model for Evidence Based Practice
 - 4. Using protocols in practice
 - C. Identification and development of clinical research questions
 - D. Identification and development of clinical research questions
 - E. Dissemination of research findings
 - 1. Readiness for change
 - 2. Barriers to change

- VI. The Human Response to Illness
 - A. Physiologic responses
 - B. Individual and family coping Behaviors seen during diagnosis and illness
 - 1. Crisis points
 - 2. Adaptive mechanisms
 - C. Socio-cultural issues and response patterns
 - D. Psychosomatic responses to illness
 - E. Denial, fear, anger, vulnerability, grief, mourning, and bereavement
 - F. Information seeking
 - G. Strategies to support individuals and families through crises
 - 1. Providing ego supportive activities
 - 2. Changing maladaptive patterns of behaviors
 - 3. Identifying community resources

Approved: Jan 2006 Graduate Council