College of Nursing and Health Sciences University of Massachusetts Boston

Course Number: NU672

Course Title: Primary Care of the Adult/Older Adult Practicum III

Course Credit: Six (6) credits; Three hours of seminar, 225 clinical hours

(16 hours per week x 14 weeks)

Semester & Year: Spring 2019

Class Location: University Hall 1350; some classes on line (see schedule)

Faculty: Jennifer Hackel, DNP, GNP-BC

Phone: 734-660-3461 (Cell)

Office Hours: Thursdays 1-3 pm or by appointment

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Email: Jennifer.Hackel@umb.edu

Clinical Faculty: Kathryn Blum MS, ANP-BC

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<u>Plan of Study:</u> This is the third practicum and clinical seminar for students in the Adult/Gerontological Primary Care Nurse Practitioner Track.

Course Description

Students further refine skills in critical thinking and clinical reasoning in the application of theory and research to practice. Assessment, diagnostic, therapeutic, and health teaching strategies are applied to a continuum of health promotion / illness problems with a focus on the primary care of adults and older adults across the continuum of care. Seminars are grounded in learning the application of theory and research to the domains of practice of the adult/gerontological nurse practitioner including the management of patient health and illness and the teaching -coaching function of the nurse practitioner and ensuring the quality of health care practices. Interdisciplinary collaborative practice skills are developed. Students develop role competencies under the supervision of nurse practitioner preceptors and faculty in a variety of health care settings.

Course Objectives

Upon completion of this course, the learner will be able to demonstrate knowledge and skills consistent with Adult- Gerontology Primary Care Nurse Practitioner competencies found at: http://www.aacn.nche.edu/geriatric-nursing/adultgeroprimcareNPcomp.pdf as well as the objectives below:

- 1. Synthesize advanced knowledge and skills required of the adult/gerontological nurse practitioner providing episodic and comprehensive primary care to clients and families from a variety of cultural backgrounds.
- 2. Demonstrate competence in completing comprehensive, episodic, or chronic illness oriented health histories and physical examinations of patients with common health problems/illnesses.

- 3. Design interdisciplinary patient management plans congruent with the professional standards, evidence based practice, and health care resources.
- **4.** Evaluate client responses to the rapeutic and pharmacological regimens, monitor and evaluate continuity of care and participate to ensure quality health care practices.

Topical areas

- 1. Unique developmental needs of adult and aging patients
- 2. Advanced physiology principles in acute and chronic illness of adults age 13 to end of life with emphasis on management of complex care and geriatric syndromes.
- 3. Issues in advance directives, ethics, palliative care, and end-of-life care
- 4. Strategies for patient empowerment communication for promoting self care & health behavior change, eg motivational interviewing, and cognitive behavioral therapy
- 5. Strategies for family-focused communication eg. crucial conversations, breaking bad news, and advance care planning
- 6. Transitional and inter-professional care across health settings
- 7. Complex case studies involving multi-morbidity, health disparities, limited health literacy and acute on chronic conditions
- 8. NP Issues in Professional development in the US Health Care System
- 9. Project implementation and outcome assessment applied to Capstone projects
- 10. Professional portfolio creation and preparation for practice

Teaching Strategies

Lecture, assigned readings, quizzes, seminar discussion, case studies, peer review, capstone implementation and analysis, capstone presentation, and mentored clinical practice with SOAP note and complex case presentations.

Textbooks

- 1. Halter, J.B., Ouslander, J.G., Studenski, S., High, K. Esthana, S., Ritchie, C.S. & Supiano, M.A. (eds.) (2017). *Hazzard's geriatric medicine and gerontology* (7th ed.). New York, NY: McGraw Hill
 - ISBN-13: 978-0071833455
- 2. Papadakis, M.A. & McPhee, S.J. (Eds.). (2018) *Current Medical Diagnosis and Treatment: 2018* (57th ed.). New York, NY: McGraw Hill Education. **ISBN 13** 978-1-25-986 1482.
- 3. Cash, J.C. & Glass, C.A. (2016). *Adult gerontology practice guidelines*. New York, NY: Springer Publishing Co. **ISBN** 978-0-8261-2762-4.

Grading

Letter grades will be given in accordance with the grading criteria indicated in the UMB Graduate Student Handbook. Students must earn a B (minimum of 83 total points) to pass this graduate level course. Students in jeopardy of failing following any given exam are asked to meet with the course professor and will be notified of their risk of failure.

Final grades are: 93-100 = A 90-92 = A- 87-89 = B+ 83-86 = B 80-82 = B- 77-79 = C+ A score of 76 or lower means the student has failed the course.

Clinical Experience

Clinical practice 225 hours refers to hours in which <u>direct clinical care</u> is provided to adults and older adults across a variety of settings. Ideally students see at least one patient per hour on average or more. All patient encounters must be logged into the clinical log program. Clinical hours do not include capstone project hours, skill lab hours, physical assessment practice sessions, or a community project if it does not include provision of direct care, however all hours spent at the assigned clinical site related to direct or indirect patient care (eg chart review or guideline investigation) can count. Students are expected to communicate their learning needs to their preceptors and to obtain midterm and final evaluations; if the student works with two different preceptors, they need midterm and final evaluations for both. Failure to have evaluations submitted in time for grades will possibly lead to failure in the course (or incomplete).

During the clinical day, students are **required** to wear a clean lab coat with a UMASS name tag clearly visible on the lapel, and carry their own stethoscope. Students will communicate preceptor contact information and ongoing progress with faculty and placement staff. Students are encouraged to ask preceptors for clinical experiences that may expand their exposure to complex patient care management. This might mean that they visit a patient admitted to the hospital, or call them for follow up at home. It could mean shadowing another provider at the clinic who provides specialty care that their adult-geriatric patients use. However, the bulk of the student's hours should be with the primary preceptor seeing patients to gain competence in advanced practice nursing skills.

Clinical Grades

Passing this course is contingent upon passing the clinical portion of the course with a basic level of competence (level 3 out of 5 in each domain of the clinical evaluation established by the National Organization of Nurse Practitioner Faculties) in all of the areas on the preceptor evaluation by the completion of the hours of practicum. If the student has NOT reached the level "3" of competency in any domain, then an individualized plan must be organized to ensure the student CAN reach competency, either with more hours at the same clinical site or additional hours at a new site. Preceptors are asked to contact faculty if there are concerns about a student's behavior or lack of competency building. Failure to complete the assignments may lead to a failing grade in the course and notification from the Graduate Program Director. Grades for this course are awarded according to the UMASS graduate studies grading policies, but the student does not pass the course without achieving competency in the clinical practicum.

Integration of clinical practice experience with seminar

- 1. Student log summaries for professional portfolio; ideally students see an average of one patient per hour at a minimum to develop AGNP competencies.
- 2. Preceptor clinical evaluation verifying basic competency in all domains of the NP role.
- 3. Three complete SOAP notes for review of completeness and accurate E&M skill.
- 4. Complex case presentation in class with pathophysiology and guideline of care review.
- 5. Completion of master's capstone project.
- 6. Creation of professional portfolio with CV and statement of purpose

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CLINICAL EVALUATION TOOL NU672

Student Name:	Agency:	
UMB Faculty Name:	Jennifer Hackel, DNP Preceptor Name:	
Contact: Faculty:	Jennifer.hackel@umb.edu 734-660-3461; Preceptor Email	
Final Review Date:	Student initials: Preceptor Signature: Preceptor Signature: Faculty Signature	

Process: Student self-rates first, then preceptor. It is expected that students will be evaluated at a score of 1-4. Please use criteria 5 for exceptional performance and advanced level students

End of Semester Expectation is at least COMPETENT across all categories in this practicum

	Student and preceptor each evaluate the NP student's ability at Midterm & Final. Place values	
	from 1-4 in the columns to the left; 0: less than novice ability; 1: novice skills; 2: advanced	
	beginner; 3: competent; 4: proficient, 5: Expert, or N/0 not observed *	
	DOMAIN 1: MANAGEMENT OF CLIENT HEALTH / ILLNESS STATUS	
	A. Health Promotion /Health Protection, and Disease Prevention Activities	_
	Appropriate to health condition, age, developmental stage, family history and ethnicity	
,	Includes screening, anticipatory guidance, counseling, and promotion of healthy	
	environments for adults and families	
	Determines patient/family health risks: analyzes subjective and objective data	
	B. Management of Patient Illness	
	History-taking skills are comprehensive, problem focused & accurate	
	Physical examination skills are comprehensive, problem focused & accurate	
	Develops appropriate differential diagnoses based on subjective and objectives data	
	Management plan: demonstrates critical thinking and diagnostic reasoning skills:	
	Selects appropriate diagnostics based on risk history, physicals, medications and labs	
	Selects appropriate patient education	
	Makes appropriate consultations & referrals	
	Performs appropriate follow-up care	
	Recognizes emergent, acute situations	
	Selects appropriate therapeutics: medications including over the counter remedies	
	DOMAIN 2: THE NURSE PRACTITIONER - PATIENT RELATIONSHIP	1
	Addresses the impact of illness on adult and families lifestyle and work	
	Individualizes care for patients age and family supports	
	Works to empower promoting joint decision-making and appropriate decision-making	
	within families	
	DOMAIN 3: THE TEACHING-COACHING FUNCTION	
	Times education / counseling appropriately	
	Individualizes teaching to readiness & motivation related to high risk life style factors:	
	smoking, exercise, sleep, stress, diet	
	Demonstrates socio-cultural sensitivity	
		1

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Delivers health education / counseling accurately
Demonstrates motivational interviewing skills
Evaluates effectiveness of teaching
DOMAIN 4: PROFESSIONAL ROLE
Uses scientific foundations, evidence based standards and practice guidelines to plan care
Able to set priorities in clinical practice
Advocates for clients and caregivers
Maintains confidentiality, privacy
DOMAIN 5: MANAGING AND NEGOTIATING HEALTH CARE DELIVERY SYSTEMS
A. Verbal skills-
Delivers organized oral case presentations
Works effectively with peers, staff
Learns from corrections; Accepts constructive criticism
Communicates schedule and plans for clinical with preceptor
B. Written communication skills, record-keeping
Written documentation demonstrates appropriate descriptors
Is Logical and accurate
Is Comprehensive
DOMAIN 6: MONITORING & ENSURING THE QUALITY OF HEALTH CARE PRACTICE
Identifies own strengths and weaknesses
Accountable for own actions
Practices according to professional and ethical principles
Demonstrates collaboration in practice
Accountable for learning, is self directed; references texts /articles to assure safe care
2 Competency Evaluation: Student Name: Preceptor Name: pr Midterm Comments:

Final Comments:

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Thank you!

Guideline for scores: 0: Absent or poorly developed skills, 1: Novice: concentration on facts, principles, concepts and adherence to rules for obtaining assessment data. 2: Advanced Beginner: is able obtain and describe assessment data and reference guidelines for practice related to a differential diagnosis 3. Competent: beginning ability to prioritize assessment data and management guidelines to form a plan of care; 4- Proficient: is able to assess, diagnose, and manage patients in a comprehensive manner including health promotion, prevention, and disease management. 5-Expert: Reflects independent safe management of complex poorly differentiated patients including skills reflected by the proficient student. * This model reflects achievement of skills from the simple to the complex and Benner' novice to expert model of skill acquisition.

*Adapted from the National Organization of Nurse Practitioner Faculty (NONPF): Domains and core competencies