

Preconference/Planning

Objective: Student will identify patient's plan of care, trajectory for the day, and clarify misconceptions.

Instructional Strategy 1: Nursing "Rounds"—Prater & Allen (2011) identify rounds as an opportunity for spontaneous learning crafting a teachable moment. As part of the preclinical assignment, students will be required to complete a 'rounding' sheet to present the patient to the clinical group. In addition, the student will present the primary nursing diagnosis and interventions for the day. This will help the student begin to identify pertinent details for patient admission and current plan of care. This will also help other students begin to work as a team. This model is similar to the way medical students present patients' cases to attending physicians and the healthcare team. The instructor would be available to prompt the student with questioning or suggestions based on case presentation. The immediate feedback will help students clarify what details are important from the medical record to the current plan of care and assist in prioritization skills. This will also help students feel prepared when getting report from the previous shift nurse.

Instructional Strategy 2: Structured Questioning—Students will be required to identify data from the medical record that was unclear or interventions that did not "make sense" to the student. Faculty will be available to guide peer conversations and help the student link the intervention to an appropriate nursing diagnosis and scholarly rationale. This is similar to

the idea of the classroom assessment technique of the “muddiest point”, but applied to the student’s preclinical work (Kirkpatrick & DeWitt, 2009).

Clinical Practice

Objective: Students will build clinical reasoning by applying didactic knowledge in the clinical setting and identifying abnormal assessment data and its implications on the patient and plan of care.

Instructional Strategy 1: Assessment performance—Students will perform head to toe assessments on all patients and identify “areas of focus” based on the patient’s clinical diagnosis. Students will describe if these clinical findings are congruent with the didactic knowledge and how it is similar or different. Prater & Allen (2011) suggest that it is critical of faculty to link the clinical experience to theoretical concepts.

Instructional Strategy 2: Nursing Intervention Implementation—Students will identify with the instructor the primary nursing intervention for the patient and explain a scholarly rationale. After assessing the patient, the student will identify how this intervention can be modified to be specific for the patient and integrate the client’s needs and preferences when performing care.

Post Conference

Objective: Students will evaluate clinical learning and apply evidenced based practices to the patient’s plan of care.

Instructional Strategy 1: Round Robin Discussion—Students will discuss their implementation of nursing interventions with the clinical group. Students will discuss how the plan of care changed throughout the day and their biggest

“Aha” moment of the day. This can be a clinical or behavioral observation. Students will discuss how this moment will effect they way they function as professional registered nurses. Lundberg, (2008) states these “shared stories are another form of peer modeling where other students can witness how their peers work through difficult situations” (p.88).

Instructional Strategy 2: EBP—“Nursing curriculum must not perpetuate knowledge built on tradition but must build a foundation on evidence that supports the nursing interventions” (Boland & Finke, 2009, p. 133). As a preclinical assignment, students will be required to identify an EBP research article that is applicable to their patient’s plan of care. Students will discuss the “real world” application of this research based on clinical interaction with the patient and healthcare team identifying both barriers and strategies to implementation. Students will identify what outcomes (positive and negative) would be applicable to the patient if the EBP would be integrated into the patient’s plan of care.

References

- Allen, S. S., & Prater, L. S. (2011). Crafting the clinical experience: A toolbox for healthcare professionals. In M. J. Bradshaw, & A. J. Lowenstein, *Innovative teaching strategies in nursing and related health professions* (5th ed., pp. 405-422). Sudbury, MA: Jones and Bartlett Publishers.
- Boland, D. L., & Finke, L. M. (2009). Curriculum Designs. In D. M. Billings, & J. A. Halstead, *Teaching in nursing: A guide for faculty* (3rd ed., pp. 119-136). Saint Louis, MO: Elsevier.
- Kirkpatrick, J. M., & DeWitt, D. A. (2009). Strategies for assessing/evaluating learning outcomes. In D. M. Billings, & H. J. A, *Teaching in nursing: a guide for faculty* (3rd ed., pp. 409-428). Saint Louis: Saunders Elsevier.
- Lundberg, K. (2008). Promoting self-confidence in clinical nursing students. *Nurse Educator*, 33(2), 86-89.