NUR 803

Conceptual and Theoretical Frameworks For Advanced Practice Nurses

COURSE SYLLABUS
Fall - 1998
Credits: 3

Section 1: Campus
Thursday 8:00 AM - 10:50 PM, A-219 Clinical Center
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Thursday 1:15 - 4:05 PM, 133D Erickson
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COURSE DESCRIPTION

This course presents core conceptual and theoretical frameworks for all advanced practice nurse students. Basic philosophical tenets are used to examine the applicability of the frameworks for advanced nursing practice. Selected frameworks, models and theories congruent with primary care and derived from nursing and other disciplines are used as exemplars. They will enable the student to examine personal practice assumptions currently used and identify ones consistent with practice and research as an advanced practice nurse.

COURSE OBJECTIVES

At the conclusion of the course the student will be able to:

1) Articulate the language, use and function of conceptual and theoretical frameworks.
2) Evaluate selected conceptual frameworks, models and theories using appropriate criteria.
3) Compare and contrast the major concepts, assumptions, utility and relevance to primary care.
4) Formulate an initial conceptual/theoretical framework for personal practice and research as an advanced practice nurse.

PREREQUISITES

This course is open to graduate students in the nursing major.

INSTRUCTIONAL METHODS

A variety of methods will be used, e.g., lecture, seminar discussion, the initiation of a personal professional portfolio, short papers, readings, interviewing, and exams.

REQUIRED TEXTS


Course Reading Packet

RECOMMENDED TEXTS


EVALUATION/GRADING
Student grades for the course will be based on the following: POSSIBLE COURSE POINTS = 1000

The grading scale is:
- 940-1000 = 4.0
- 875- 939 = 3.5
- 810- 874 = 3.0
- 750- 809 = 2.5
- 700- 749 = 2.0
- 650- 699 = 1.5
- 600- 649 = 1.0

ASSIGNMENTS INCLUDE

1. PROFESSIONAL PORTFOLIO (150 points):
   - Resume
   - Personal Practice Philosophy - Draft # 1
   - Personal Practice Philosophy - Final Version

2. CLASS PARTICIPATION (100 points):
   Guidelines to be discussed at first scheduled class.

3. ASSESSMENTS AND ANALYSIS (200 points):
   - Genogram (100 points)
   - Ecomap (100 points)

4. THEORY APPLICATION TO A CONTEMPORARY ISSUE / FILM (200 points):
   - Paper & Class Presentation

5. COMMUNITY PROGRAM REPORT (50 points):

6. MIDTERM AND FINAL EXAMINATIONS (300 points):
   - Midterm Exam (100 points) will:
     Cover all frameworks presented through October 8th.
     Be completed during the first hour of class time.
   - Final Exam (200 points) will:
     Be held during designated class time (day and hours) during final exam week.
     Be a two hour comprehensive exam.

PLEASE NOTE:
Assessments are due at the beginning of class time.
Do not exceed maximum number of pages for assignments.
Exams may include short essay, short answer, matching and/or multiple choice.
NUR 803 CLASS SCHEDULE

September 3: COURSE OVERVIEW
REVIEW OF BASIC THEORETICAL COMPONENTS (Nursing & Related Frameworks)
Personal Practice Philosophy (Draft # 1): In-Class Assignment

September 10: DEVELOPMENTAL FRAMEWORKS
Application of Developmental Frameworks to novel, “The Good Husband”
Resume Due

September 17: SYSTEMS FRAMEWORKS
Application of Systems Frameworks to novel, “The Good Husband”

September 24: STRESS AND CRISIS FRAMEWORKS
Application of Stress and Crisis Frameworks to novel, “The Good Husband”

October 1: IN-CLASS FILM: “Stuart Saves His Family” as context for application of developmental, systems,and stress and crisis frameworks
Genogram Due

October 8: SMALL AND LARGE GROUP DISCUSSION OF FILM with application to frameworks.
Ecomap Due

October 15: EXAM I
REVIEW OF NURSING DIAGNOSIS: Individual, family and group
Application of Nursing Diagnosis and Frameworks to novel, “The Good Husband”

Application of Health Promotion and Disease Prevention to novel, “The Good Husband”

October 29: CHANGE FRAMEWORKS: Individual, family, & group
Adoption of positive health behavior/Altering problem health behavior

November 5: CHANGE FRAMEWORKS: Discussion about community program reports
Community Program Report Due

November 12: STUDENT PRESENTATIONS Related to Films: Groups 1 and 2
Film Analysis Paper Due

November 19: STUDENT PRESENTATIONS (Continued): Groups 3 and 4
Film Analysis Paper Due

November 26: THANKSGIVING RECESS (No Class)

December 3: STUDENT PRESENTATIONS (Continued): Groups 5 and 6
Film Analysis Paper Due

December 10: DISCUSSION OF STUDENTS’ PERSONAL PRACTICE PHILOSOPHIES
Course Summary and Course Evaluation
Personal Practice Philosophy Final Version Due

December 17: FINAL EXAM
ADDITIONAL INFORMATION ABOUT COURSE ASSIGNMENTS:

THE PROFESSIONAL PORTFOLIO  (150 Possible Points)

The professional portfolio is introduced as part of NUR 803 and altered at intervals as the student progresses throughout the program and its courses. The portfolio fulfills a variety of goals:

1) It is a mechanism which will enable the student to convey personal achievements to faculty in succeeding courses.
2) It provides an opportunity for the student to demonstrate conceptual progression of APN practice.
3) It can result in a product or marketing tool which the student can provide to prospective employers.

The Professional Portfolio for NUR 803 will include:

* A Resume (50 Points) includes:
  - the student’s educational and work experience upon admittance to the graduate program,
  - a professional goal statement,
  - a listing of articles written, presentations given, awards received, and current affiliations with professional organizations including positions of leadership,
  - and other information that would provide a potential employer with a comprehensive understanding of the student’s professional strengths.

* A Personal Practice Philosophy - Draft # 1 (50 Points) describes:
  - the student’s current view of the conceptual underpinnings of his/her practice upon entry to the graduate program, i.e., beliefs regarding what guides nursing practice (assumptions, concepts).

* A Personal Practice Philosophy - Final Version (50 Points) describes:
  - the student’s projected view of the conceptual underpinnings of practice as an advanced practice nurse at the conclusion of NUR 803.

For program purposes each student is advised to purchase a standardized folder which can be used throughout their graduate program. An example will be available for review at the first class session. The portfolio characteristics which will be evaluated upon its submission with relative items include:

* a good quality white paper was used for all items
* materials are clean copies
* materials are presented in an organized fashion
* materials are complete.
THE SEMINAR (100 Possible Points)

Participation will be assessed over the semester. The following criteria will be utilized in awarding the points at the semester's conclusion.

100 = Contributes consistently to class; comments reflect information/ideas from the required readings.

75 = Contributes to the majority of classes; comments are pertinent to the discussion and reflect thoughtful consideration of materials.

50 = Contributes to the majority of classes; comments reflect primarily own ideas rather than readings.

25 = Contributes to some of classes; comments reflect limited knowledge of issues.

0 = Does not contribute to class participation.
THE GENOGRAM (100 Possible Points)

The genogram includes the “structure” of the family from a three generational perspective. In addition, to the structure of the family, an assessment and interpretation of the data from each generation is important in order to understand the functioning of the unit and the generational influences.

OBJECTIVES:

* To acquire familiarity with the family assessment instrument, the Genogram, by conducting a family assessment using the genogram.

* To identify the strengths and limitations of the use of this family assessment instrument.

* To gain experience in the analysis and interpretation of family data.

* To convey the results of the analysis to the family and other health professionals through both written and verbal communication.

PROCESS:

1) Select a family (OTHER THAN YOUR OWN) composed of individuals from three generations including an individual 65 years of age or older.

2) Conduct one or more interviews with at least two family members representing different generations to gather the data. Refer to the “Interview Guidelines” which follow.

3) Complete the genogram assignment (MAXIMUM OF A TOTAL OF 8 PAGES) using the following criteria.

4) Submit completed assignment according to the class calendar.

5) After receiving the graded genogram assignment, conduct a final interview with the family members who were interviewed to discuss the genogram.

Required Reading:

CRITERIA FOR GENOGRAM

1. (20 points) Prepare a three generational family genogram by identifying family members by first names, nicknames, and family labels.
   a. DIAGRAM the demographic data (include legend on the genogram)
   b. Describe the stage of family development for each generation and the implications (narrative).
   c. Describe the changes in family structure, i.e., additions and losses of family members - significance to the family in the three generations. (narrative)
   d. Identify a sequence of family events which are stressors during a designated period.

2. (10 points) Select a major family theme and cite evidence from your data that supports the significance of this theme across the three generations. Include the similarities and differences in the generations. (narrative)

   Family Themes - are defined as subjects or topics of verbal or nonverbal communication that are repeated over time and influence the behavior of family members. The following are examples of topics which might become family themes: work, leisure, education, roles, orientation toward adults, children, or both, time (future, present, past), money, independence/dependence, culture (norm, traditions, rituals perpetuated, etc.)

3. (10 points) Identify linkages between/among family members: Closest and most distance relationships on each generational level. Indicate dyads or triads with the strongest bonds and isolated members who are consistently “left out”, communication patterns, type of contact with members (i.e., mail, phone, person to person, interpretation, significance, etc.); the role of each generation in relation to the family; discuss the significance of findings.

4. (40 points) Identify and discuss the family’s health history and patterns of illness or disease which are inherited, communicable or chronic, e.g., diabetes, cancer, TB, heart disease, etc. Also note major accidents.
   a. Discuss their significance across the three (3) generations. (narrative)
   b. Describe at least three (3) family strengths based upon the analysis.
   c. State one actual and one potential nursing diagnosis relevant to the family’s health history.
   d. Describe health behavior or changes in health practices occurring at/or subsequent to the time of the sequence of family events which were stressors.

5. (15 points) Using a “script” format present a summary of your findings which you plan to share both verbally and in written form with the family.

6. (5 points) Describe the strengths and limitations of this assessment tool.

NOTE: All narrative components should be written as a formal paper and follow the APA format, i.e., double-spaced, citations, margins, etc.
INTERVIEW GUIDELINES

• Take time to establish a comfortable rapport with the individual(s) who agreed to be interviewed before asking them questions for the purpose of the assignment(s).

• Explain the purpose of your interview(s) as related to the assignment(s). Let the person you are interviewing know that they are helping you to learn more about individuals and families and that you are interested in them.

• Be alert for signs of fatigue while you are conducting the interview(s). At the beginning of each interview it is helpful to tell the person(s) that they should let you know if they are getting tired. Terminate the interview and schedule another visit if you find the person(s) is becoming tired.

• Try to appear relaxed and unhurried as you conduct the interview(s). Give the person time to tell their stories and guide them toward the information you need by using cues that they give you.

• Be willing to share yourself with the person you are interviewing. You are asking them for a good deal of personal information and you may find that they will be interested in learning about you and your background too.

• Don’t make judgments about the person(s) you are interviewing. Each person has a history which is the reality of their life. It is important that you not give the impression that you find the information to be “inaccurate” or “the wrong way to do something”.

• Enjoy the time you spend with the person(s) who agrees to be interviewed.
THE ECOMAP (100 Possible Points)

The ecomap provides a graphic depiction of a family’s relationships and interactions with its immediate environment; it can reflect the relationships of individual members and/or the family as a unit with external individuals, groups, agencies and institutions. Interpretation of the ecomap reflects the degree to which individuals and the family as a unit are related to the external environment or how open or closed family boundaries.

OBJECTIVES:

* To acquire familiarity with the assessment instrument, the ecomap, by conducting a family environment assessment using the ecomap.
* To identify the strengths and limitations of the use of this assessment instrument.
* To gain experience in the analysis and interpretation of family data.

PROCESS:

1) Select a family (OTHER THAN YOUR OWN) composed of four to six individuals including an individual age 65 or older.

2) Conduct an interview with at least two family members at the same time to collect the data. Refer to the “Interview Guidelines”.

3) Complete the ecomap assignment (MAXIMUM OF A TOTAL OF 4 PAGES) using the following criteria.

4) Submit completed assignment according to the class calendar.

5) After receiving the graded ecomap assignment, conduct a final interview with the family members who were interviewed to discuss the ecomap.

Required Reading:

CRITERIA FOR ECOMAP (100 Possible Points)

1. (20 points) Prepare a family ecomap:
   a. Diagram the demographic data (include legend on the ecomap)
      Include: Name and age and relationship to each other (similar to genogram approach).
      (Insert this core information in the middle of the large center circle.)
   b. Identify external resources for each family member and also the “family as a unit”.
      (Insert the name of the resource, i.e., agency, organization, name, in individual smaller
      circles around the larger family circle. Consider a wider variety of personal and family contacts, e.g.,
      recreational, social, employment, educational, political and religious affiliations.)
   c. Specify the nature of the relationships by the type of line which connects the smaller circle to either the
      individual or the “family as a unit”, e.g., straight lines show strong relationships, dotted lines tenuous
      relationships, slashed lines conflictual/stressful relationships, wider lines reflect the strength of the
      relationship, and arrows show the direction or flow of the energy and/or resources within a particular
      relationship.

2. (15 points) Describe the overall picture of the ecomap. e.g., close and strong relationships with weak or
   conflictual relationships and emerging patterns..

3. (15 points) Discuss the degree with which the ecomap reflects individual and family relationships with
   the external environment and the openness or closedness of the family boundaries.

4. (15 points) Describe at least three family strengths based upon this analysis.

5. (15 points) Based upon your analysis, what issues or concerns would you share with the family and why.

6. (15 points) Using a “script” format present a summary of your findings which you can share with the
   family.

7. (5 points) Describe the strengths and/or limitations of this assessment tool.
THE FILM ANALYSIS PAPER (200 Possible Points)

Six films depicting different current issues impacting today’s families have been selected as the approach for the application of the four categories of frameworks included in the NUR 803. Please review each description and determine which films are of special interest to you. A sign-up sheet has been developed for each film; each student will indicate a preference for one of films on a sign-up sheet. Generally four to six students will be matched with each film.

FILMS SELECTED FOR NUR 803

SOUL FOOD
The story of three black sisters, the conflicts they survived, and their reflection upon their relationships with their mother.

THE BIRDCAGE
Portrays a longstanding gay couple in Miami who experience a variety of issues when the one partner’s biological son plans to marry the daughter of a family values right-wing senator.

ULEEY’S GOLD
This movie focuses on the efforts of a father (grandfather) to hold his family together through drug addiction, jail time and helping raise teenage grandchildren.

MARVIN’S ROOM
A story about a chronically ill father and the relationships with and between his two daughters during a time of crisis for both.

THE BURNING BED
A made for television drama about a woman who could no longer endure spousal abuse and being the battered wife.

THE WHALES OF AUGUST
This is a story about two elderly sisters, one care and the other cantankerous, blind and possibly senile, who grapple with the issue of remaining in their home or moving to nursing home.

CRITERIA FOR FILM ANALYSIS

INDIVIDUAL STUDENT RESPONSIBILITIES (150 Possible Points)

* View each of the six films prior to the film’s discussion in class.

* For the film you selected on the sign-up sheet, the paper will include:
- An introduction which describes the significance and current societal status of the issue.

- Analysis of the issue by comparing/contrasting two frameworks identified in the developmental, systems, and stress/crisis categories:
  a) why you selected the frameworks,
  b) the systematic application of the components of each framework (i.e., assumptions, concepts, strengths/limitations when applied to the issue)

- Identification of the stressors present in the situation

- Identification of 2-3 family/individual strengths

- Discussion of the adapting and coping mechanisms present

- Nursing diagnosis statements describing an individual and family diagnosis for both an actual and a potential health issue (4 diagnostic statements)

- Discussion about the appropriateness of one change framework for the issue selected.

- Analysis of the projected implications to APN practice including identification of 3-4 nurse practitioner role characteristics.

- Application of APA referencing from course reading as well as two additional issue related articles (submit a copy of the two additional references with the paper)

**GROUP RESPONSIBILITIES (50 Possible Points)**

* Each group will have approximately 60 minutes of class time to facilitate a class discussion about the film.

* As part of the discussion the group will analyze the issue utilizing the individual analysis of the group members.

* Creative strategies for promoting class participation are encouraged.
COMMUNITY PROGRAM REPORT (50 Possible Points)

Preparation for Assignment

Look in your local newspaper or listen for public service announcements in the media, and identify a community support group you would be interested in attending. It will be important to obtain the name and phone number of the group’s contact person, since many groups will not accept drop-in visitors without prior arrangements. In addition, some groups are not open to non-members. All of these factors need to be assessed prior to attending the group. Be sure you are clear on the location and time of the meeting, and be sure to arrive on time. Introduce yourself to the group leader and ask about the appropriate way to introduce yourself to the group members and if you will be allowed to participate or just observe. You may be asked to explain your purpose in attending the group. While it is fine to say that it is part of course assignment, it will also be important to express a sincere interest in the focus of the group. Groups often times like to feel they may be helping someone else by allowing a visitor to attend. You may want to mention that your visit will provide you with information about community resources for your primary care patients.

Report

Prepare a 1 PAGE typed report, and submit it on the date indicated on the course calendar.

Obtain the following information for your report:
1. Include the full name of the group you attended. If it is affiliated with a state or national organization, include that information as well.
2. Provide a brief definition of the group.
3. Identify the mission of the group.
4. What are the demographics of the group, i.e., is the group gender or age specific?
5. How does this group support the individual who attends?
6. Is there a spouse or caregiver counter-part to this group?
7. How could this group enhance family dynamics?
8. How does this group enhance the community in which it is located?
9. Based on the mission (goal) of the group, summarize why you might or might not consider referring one of your primary care patients to this group.
10. Did you enjoy attending this group when considering the group dynamics, i.e., leadership, environment created, level of participation, openness to ideas, emotional support expressed, quality of ideas shared (e.g., were facts accurate?).
Al-Anon: Nonsmoking meeting noon Mondays and Thursdays at North Presbyterian Church, at North Washington and Grand River avenues (use back door). 323-9715.

Alcoholics Anonymous: Closed non-smoking meeting 7:30-8:30 p.m. Thursdays at St. David’s Episcopal Church, 1519 Elmwood Drive. 323-3252.

Alcoholics Anonymous: Closed non-smoking meeting noon-1 p.m. Mondays and Thursdays at North Presbyterian Church, at North Washington and Grand River avenues (use back door). 323-3253.

Alzheimer’s Association Family Caregiver Support Group: Charlotte-area group 2-4 p.m. Wednesday at Eaton County Medical Care Facility, 530 W. Beech St., Charlotte; free. Lansing evening group 6:30-8:30 p.m. Tuesday at St. Lawrence Mercy Center, Auxiliary Room 1201 Oakland; free. St. Johns, group 7-8:30 p.m. Monday at Pilgrim United Methodist Church 2965 W. Parks Road, St. Johns; free. 1-800-337-3827.

Candida Study/Support Group: First and third Thursdays of the month. All aspects of healthy living are discussed, with focus on candida and dental problems. Info: Linda at 669-9213 or Alice at 669-8005.

Comeback Crowd: For those who have suffered a stroke. Potluck and guest speaker with program on Computer Rehab/Consulting 11:45 a.m.-2 p.m. today in Room 209, Second Floor, Sparrow Hospital; $1/monthly dues. Bring dish to pass and own table service.

Compassionate Friends: For bereaved parents, 7:30-10 p.m. first and third Tuesdays monthly at 407 W. Greenlawn Ave. Info: Mary Bessette at 482-9757 or Kathryn Milbourne, 646-0194.

Dignity of Greater Lansing: For gay and lesbian Catholics, 8 p.m. first and third Tuesday of each month at St. John’s Student Parish, 327 M.A.C. Ave., East Lansing. For newsletter, write: P.O. Box 1265, East Lansing, MI 48826; or call 351-7341 or 886-4511. E-mail: dignitylansing@voyager.net.

Eaton Community Hospice: Grief support group 10 a.m. second and fourth Saturdays of each month at 313 Lansing St., Charlotte. 543-5310.

Food Addicts Anonymous: Support group at the Listening Ear. For information call 337-1717.

Food Addicts Anonymous: Twelve-meeting meeting 7:30-9 p.m., first and third Mondays of every month at Faith Wesleyan Church, 2300 Lake Lansing Road; free. Call Kathleen at 887-9872 or Michon at 669-4587.

Headache Support Group: For headache sufferers, their families and friends, topic “Headaches and Vacations” 7-8:30 p.m. Tuesday at Sparrow Hospital, Classroom 206, 1215 E. Michigan Ave.; free. 1-800-372-7742.


Lansing Area Obsessive Compulsive Disorder Support Group: 7-8:30 p.m. first and third Thursdays of each month at Delta Presbyterian Church, 6100 W. Michigan Ave. Info: 393-9485 or 485-6653.

Manic Depressive and Depressive Support Group: For those with a mood disorder, family and friends welcome, 7:30-9:30 p.m. Wednesdays at St. Lawrence Hospital, 1201 W. Oakland Ave., third-floor conference room. Info: Janet, 577-0397.

Overeaters Anonymous: Sunday: 9 am at Sparrow Hospital, Rm 204, 1215 E. Michigan Ave, Mondays: 6:30 am at Millett School, 5217 Old Lansing Road; 4 pm at Peace Lutheran Church, 830 N. Cochran, Charlotte; 7 pm at St. David’s Episcopal Church, 1519 Elmwood. Tuesday: 6 pm at United Methodist Church, 210 E. Lawrence, Charlotte; 8 pm at First Presbyterian Church, corner Holt, Aurelius, Holt. Wednesday: 6:30 am at Millett School, 5217 Old Lansing Road Thursday: 4 pm at Peace Lutheran Church, 830 N. Cochran, Charlotte; 8 pm at First Holt/Aurelius, Holt. Friday: 6:30 am at Millett School, 5217 Old Lansing Road. Saturday: 9:30 a.m. at Sparrow Hospital, Room 204, 1215 E. Michigan. Hotline: 485-5400.

Parents Without Partners: Breakfast and orientation 10 am Saturdays at Theio’s Restaurant, 2005 N. Larch St.; menu prices. 676-4522 or 339-6710.

Passages Grief Support Group: For those who have experienced a loss through death, 6:30-8 pm. first and third Thursday of the month at Calvary United Methodist Church, 1919 S. Pennsylvania Ave. Sponsored by the Hospice of Lansing and Ingham Hospice.

Pet Loss Support Group: Professional counselors assist owners dealing with the loss of a pet 7 pm first Tuesday of each month in A174 Veterinary Medical Center, MSU; free. Info: 353-5064.

Relatives Inc: For relatives and friends of people suffering from mental illness, 7-9 pm. Friday at Mt. Hope Methodist Church, Mt. Hope and Cedar Streets.

Schizophrenics Anonymous/Community Mental Health: Self-help group for people with schizophrenia or schizophrenia-related symptoms 2:30-3:30 pm today at Charter House, 606 W. Shiawassee; free. 371-2077.
Objective: The student will:

1. Review the goals of conceptual and theoretical development of scientific thought.
2. Review the process of theory and model development and construction in nursing.
3. Examine major issues related to theory development in nursing.
4. Define the constructs of “assumption” and “concept”.
5. Evaluate selected nursing conceptual and theoretical frameworks utilizing established criteria.
6. Evaluate existing theoretical perspectives from nursing and related disciplines for APN practice and research.

Activities:

* Sketch initial ideas for inclusion in “Personal Practice Philosophy - Draft # 1”.

Required Readings:


Supplement References:

Questions to Consider When Evaluating Theoretical and Conceptual Frameworks:

* What values are explicit and/or implicit in the framework?
* Are the words or terms of the framework defined to promote reader understanding?
* Are the words or terms of the framework applicable to all persons or specific groups?
* Are the words or terms of the framework applicable across time and place?
* Is the internal structure of the framework logically consistent?
* Are the links between the concepts clear?
* Is there a schematic representation? Is it supported by the text?
* Does the framework reflect logical translation of diverse perspectives?
* Does the framework socially congruent, promote social change or lead to nursing activities that meet social expectations?
* Can testable hypotheses be derived from the framework?
* Does the framework help define nursing goals?
* Does the framework assist in identifying the appropriate recipient of nursing care?
* Does the framework reflect the four essential concepts of nursing, i.e., man, environment, health & nursing?
* Does the framework define the source of difficulty or area of need for nursing intervention?
* Does the framework direct attention to the consequences of nursing intervention?
* Does the framework provide a means of communicating about nursing practices with other nurses?
CLASS 1 and CLASS 14:

ATTRIBUTE EXERCISE

DIRECTIONS: Rate the following attributes as to their importance to your personal nursing philosophy.

<table>
<thead>
<tr>
<th>Attribute</th>
<th>1 = low importance</th>
<th>10 = high importance</th>
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<tbody>
<tr>
<td>Collaboration</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Independent practice</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Client role</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Practice setting</td>
<td>1</td>
<td>5</td>
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<tr>
<td>Family involvement</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Social support</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Science of nursing (theory based practice)</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Intuition</td>
<td>1</td>
<td>5</td>
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<tr>
<td>Art of nursing</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Personal attributes</td>
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STRENGTHS AND LIMITATIONS:

RELATED FRAMEWORKS, THEORIES AND MODELS:

ISSUES/PROBLEMS
APPLICABLE TO RESEARCH AND PRACTICE

APPROPRIATENESS TO APN IN PRIMARY CARE?

DISCUSSION REGARDING
September 10, 1998
CLASS # 2: Developmental Frameworks

Objectives: The student will:

1. Evaluate selected developmental conceptual and theoretical developmental frameworks utilizing established criteria.
2. Apply the selected developmental frameworks (Erickson, Duval, Transition) to individuals and families in assigned novel, “The Good Husband”.
3. Analyze the impact of normative individual and family transitions, e.g., retirement, relocation, widowhood on the health and adaptation of aged persons within their cultural and ethnic environments.
4. Assess the impact of the stages of the family life cycle, the family developmental tasks, and family structures on family health status.

Activities:
* Apply “Guideline for Framework Analysis”.
* Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of developmental frameworks.

Required Readings:


Supplemental Readings:


September 17, 1998
CLASS # 3: Systems Frameworks

Objectives: The Student will:

1. Evaluate selected systems frameworks utilizing established criteria.
2. Apply selected systems frameworks to families, groups and societal systems.
3. Evaluate selected systems frameworks for APN practice and research.
4. Compare selected systems frameworks with nursing frameworks with a systems perspective, i.e., Rogers & Neuman.

Activities:

I. Apply “Guideline for Framework Analysis”.
2. Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of systems frameworks.

Required Readings:


Supplemental Readings:


Rogers, J. (1994). Can physicians use family genogram information to identify patients at risk of anxiety or depression? Archives of Family Medicine, 3(12), 1093-1098.

September 24, 1998
CLASS # 4: Stress/Crisis Frameworks

Objectives: The student will:

1. Analyze selected stress and crisis frameworks, e.g., ABCX, utilizing established criteria.
2. Examine previously reviewed developmental and systems frameworks in relation to stress and crisis frameworks for the individual, family and group.
3. Evaluate the selected stress and crisis frameworks for APN practice and research.
4. Apply selected stress and crisis frameworks at the individual and family level apparent in the novel, “The Good Husband”.

Activities:
1. Apply “Guidelines for Framework Analysis”.
2. Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of selected stress and crisis frameworks.

Required Readings:


Supplemental Readings:


October 1, 1998
CLASS # 5

AND

October 8
CLASS # 6: Film, “Stuart Saves His Family”

Objectives: The student will:

1. Analyze the film, “Stuart Saves His Family”, using the previously reviewed frameworks.
2. Participate in presenting the analysis to other class participants.
3. Compare and contrast the application of each of the frameworks used to analyze the film.

Activities:
1. View the film, “Stuart Saves His Family” through the lens of “one” of the frameworks.
2. Take selected notes to assist in the application of the selected framework.
3. Participate in small group discussion with other class participants who viewed film from same framework.
4. Following small group discussion, prepare with other class participants a transparency (s) which demonstrates application of the framework to the film.
5. Participate in large group discussion of all presented transparencies representing the various framework application.

Required Readings:


Supplemental Readings:

October 15, 1998
CLASS 7: EXAM I (One hour)

REVIEW OF NURSING DIAGNOSIS (Individual, Family and Group)
APPLICATION OF NURSING DIAGNOSIS AND FRAMEWORKS: “The Good Husband”

Objectives: The student will:

1. Assess family data from “The Good Husband” to determine applicable individual, family and group nursing diagnosis.
2. Distinguish between “strength” based diagnosis vs “need” based diagnosis.
3. Derive individual, family and group nursing diagnosis (actual and potential) appropriate to novel characters, families, and groups.
4. Develop strength based diagnoses appropriate to novel characters.

Activities:

1. Engage in small and large group discussion.

Required Readings:


Supplemental Readings:


CLASS 8: REVIEW OF HEALTH PROMOTION AND DISEASE PREVENTION
APPLICATION OF HEALTH PROMOTION AND DISEASE PREVENTION: “The Good Husband”

Objectives: The student will:

1. Examine the epidemiological model including the “web of causation”, and levels of prevention (primary, secondary and tertiary) utilizing established criteria.
2. Explore the applicability of these frameworks to the top 20 primary care conditions.
3. Discuss primary care conditions present in “The Good Husband”.
4. Examine the potential relationships between these frameworks and those previously analyzed, i.e., developmental, systems, and stress and crisis.

Activities:

1) Apply “Guidelines for Framework Analysis”.
2) Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of epidemiological model including, the “web of causation” and levels of prevention.

Required Readings:


Top 20 Primary Care Conditions

Diagnosis Clusters that Make up the Majority of Nonreferred Ambulatory Visits to US Office-Based Physicians, NAMCS, 1989-1990

<table>
<thead>
<tr>
<th>Cluster Title</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>General medical examination</td>
<td>7.2%</td>
<td>07.2%</td>
</tr>
<tr>
<td>Acute upper respiratory tract infection</td>
<td>6.2%</td>
<td>13.4%</td>
</tr>
<tr>
<td>Hypertension</td>
<td>4.4%</td>
<td>17.8%</td>
</tr>
<tr>
<td>Prenatal care</td>
<td>4.3%</td>
<td>22.1%</td>
</tr>
<tr>
<td>Acute otitis media</td>
<td>3.5%</td>
<td>25.6%</td>
</tr>
<tr>
<td>Acute lower respiratory tract infection</td>
<td>2.7%</td>
<td>28.3%</td>
</tr>
<tr>
<td>Acute sprains and strains</td>
<td>2.7%</td>
<td>31.0%</td>
</tr>
<tr>
<td>Depression and anxiety</td>
<td>2.5%</td>
<td>33.5%</td>
</tr>
<tr>
<td>Diabetes mellitus</td>
<td>2.1%</td>
<td>35.6%</td>
</tr>
<tr>
<td>Lacerations and contusions</td>
<td>1.9%</td>
<td>37.5%</td>
</tr>
<tr>
<td>Malignant neoplasms</td>
<td>1.7%</td>
<td>39.2%</td>
</tr>
<tr>
<td>Degenerative joint disease</td>
<td>1.7%</td>
<td>40.9%</td>
</tr>
<tr>
<td>Acute sinusitis</td>
<td>1.6%</td>
<td>42.5%</td>
</tr>
<tr>
<td>Fracture and dislocations</td>
<td>1.6%</td>
<td>44.1%</td>
</tr>
<tr>
<td>Chronic rhinitis</td>
<td>1.5%</td>
<td>45.6%</td>
</tr>
<tr>
<td>Ischemic heart disease</td>
<td>1.4%</td>
<td>47.0%</td>
</tr>
<tr>
<td>Acne and diseases of sweat glands</td>
<td>1.3%</td>
<td>48.3%</td>
</tr>
<tr>
<td>Low back pain</td>
<td>1.2%</td>
<td>49.5%</td>
</tr>
<tr>
<td>Dermatitis and eczema</td>
<td>1.2%</td>
<td>50.7%</td>
</tr>
<tr>
<td>Urinary tract infection</td>
<td>1.1%</td>
<td>51.8%</td>
</tr>
</tbody>
</table>

The estimated number of visits for 1989-1990 (the denominator) is 1,297,334 (in thousands). This is based on 74,390 survey visits. All relative standard errors are less than 30%.

Source: Rosenblatt et al., 1995.
Objective: The student will:

1. Evaluate selected learning/counseling frameworks utilizing established criteria.
2. Examine the applicability of these frameworks to selected case situations reflecting primary care conditions.
3. Examine relevant research applicable to advanced nursing interventions.
4. Compare/contrast the Health Belief Model and the Health Promotion Model.
5. Apply the concept of mutuality to promote health behaviors in primary care situations.

Activities:

1. Small and large group discussion of:
   * Heath Promotion Model as applied to diabetic teaching.
   * Variations on the Health Belief Model as applied to breast cancer screening.

2. Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of selected learning and counseling frameworks.

Required Reading:


Supplemental Readings:


CLASS 10: CHANGE FRAMEWORKS (cont'd)

Objectives: The student will:

1. Examine selected learning and coping frameworks utilizing establish criteria.
   (social learning theory, attribution theory, transtheoretical model)
2. Examine selected learning and coping frameworks as a basis for developing educational approaches in primary care, including client characteristics.
3. Apply selected learning and coping frameworks to characters, families, and groups in “The Good Husband”.
4. Develop behavioral approaches utilizing concepts incorporated by the frameworks, e.g., self-efficacy, locus of control, learned helplessness, empowerment, adaptation).
5. Examine selected assessment tools reflecting selected learning and coping frameworks.

Activities:

1. Apply “Guideline for Framework Analysis”.
2. Examine “Personal Practice Philosophy - Draft # 1” for possible inclusion of learning and coping frameworks
3. Attend a community based program which addresses a health issue.
4. Small and large group discussion of:
   * Prochaska’s model as applied to smoking cessation or weight reduction.
   * Bandura’s social learning theory as applied to teaching in cognitive reframing and self efficacy.
   * Skinner’s behavioral theory as applied to hypertension education.

Required Readings:


Supplemental Readings:


CLASS 1
and
CLASS 14:

ATTRIBUTE EXERCISE

DIRECTIONS: Rate the following attributes as to their importance to your personal nursing philosophy.

<table>
<thead>
<tr>
<th>Attribute</th>
<th>1 = low importance</th>
<th>5</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaboration</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Independent practice</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Client role</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Practice setting</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Family involvement</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Social support</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Science of nursing (theory based practice)</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Intuition</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Art of nursing</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Personal attributes</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>