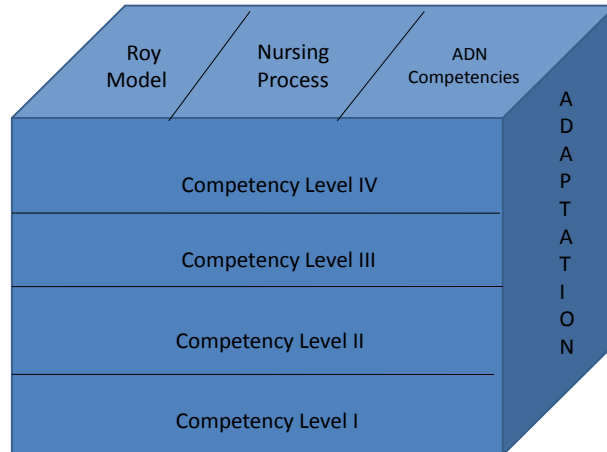


Los Angeles Harbor College
Associate Degree Nursing Program

ORGANIZATIONAL CONCEPTUAL FRAMEWORK



The organizational framework of the ADN curriculum is derived from the mission and philosophy of the program. Three major concepts are integrated into its conceptual framework. The first concept is the Roy Adaptation Model, which describes and gives defining characteristics to the person, environment, nursing and health. The Roy Adaptation Model, as it is utilized by Los Angeles Harbor College, has been simplified to make it more appropriate for use at the Associate Degree Nursing level. The program's courses are organized into the traditional nursing areas of basic skills and fundamentals, medical-surgical, geriatric, maternal, pediatric, mental health, psychiatric, leadership and client-care management.

The second concept is the Nursing Process, relating the five-part problem solving process, Assessment, Analysis (Nursing Diagnosis), Planning, Implementation and Evaluation. The Nursing Process concept is expanded to include a sixth step of the Nursing Process as defined by the Roy Adaptation Model. The Nursing Process is also integrated into every nursing course, focusing on client behaviors and responses and nursing actions and care rather than the medical diagnoses and treatments.

Throughout the program, each course uses expected student behavioral levels of the program outcomes to organize the course content (See Tables 1). Associate Degree Nurse (ADN) Competencies are the third major concept that organizes the course content. The ADN Competencies are used not only as one of the frameworks of the course objectives, but also as the framework for evaluation of student progress and performance (See table 2).

All three major concepts utilize evidenced based theory and information from the biological, behavioral and social sciences, and humanities.

Table 1: LEARNER PROFICENCY/BEHAVIORAL LEVELS

First Learner Level, Nursing 313, 315	At this level, which comprises courses in the first semester of the nursing program, the students are expected to integrate and synthesize knowledge obtained in prerequisite courses. The students are introduced to nursing concepts and professional behaviors that they are to adhere to and practice under the guidance of experts in the clinical setting. They are expected to carry out the nursing process, perform basic nursing skills, and complete client's care plan of care utilizing a set of rules and resources in their decision making.
Second Learner Level, Nursing (323/325)	At this level, which comprises courses in the second semester of the nursing program, students are expected to apply nursing concepts and recognize abnormal physical attributes in clinical settings to an identified adult patient population, develop plan of care and make decisions on the basis of general guidelines or principles derived from previous experiences, and use appropriate resources to assist in solving client problems. The student can perform basic skills and applies guidelines that are based on cues from experts. They attempt to correlate theory with practice.
Third Learner Level, Nursing 333, 335, 339, 343, 345	At this level, which comprises courses in the third semester and two courses in the fourth semester of the nursing program, students are expected to continue to apply and adapt medical surgical nursing concepts to clients across the life span in a variety of community based health care settings, modify plan of care and make decisions for clients at a variety of developmental stages on the basis of general guidelines or principles derived from previous experiences, organize and prioritize nursing interventions with supervision, and use appropriate resources to assist in solving client problems. The student can adapt to different age groups basic skills and develops new skills applying guidelines that are based on cues from experts. They attempt to correlate and build on medical surgical theory and practice.
Fourth Learner Level, Nursing 347	At this level, which compromises the clinical preceptorship taken in the final four weeks of the nursing program the students can demonstrate mastery of the terminal student learning objectives.

Learner proficiency levels were adapted from Brenner, P.. Novice to Expert: Excellence and Power in Clinical Nursing Practice, (2001) and, Ford, C.W., Clinical Teaching in Allied Health Professions

I. THE ROY ADAPTATION MODEL

The Roy Adaptation Model is a systems model utilizing external and internal stimuli and the client's adaptation level to maximize health status. The behaviors or responses of the person are manifested in four modes (physiologic-physical, self concept-group identity, role function, and interdependence). Behaviors may be adaptive or ineffective. Although assessed by mode, behaviors are interrelated, the modes overlap, complex relationships exist, and the holistic nature of the person is greater than the sum of the modes. The goal of nursing is to promote adaptation in each of the modes, thereby contributing to the person's health, quality of life, and dying with dignity.

II. NURSING PROCESS (ACCORDING TO ROY)

A problem solving approach for gathering data, identifying the capacities and needs of the human adaptive system, selecting and implementing approaches for nursing care, and evaluation of the outcome of care provided:

1. Assessment of Behavior: the first step of the nursing process which involves gathering data about the behavior of the person as an adaptive system in each of the adaptive modes physiologic-physical, self concept-group identity, role function, and interdependence.

2. Assessment of Stimuli: the second step of the nursing process which involves the identification of internal and external stimuli that are influencing the person's adaptive behaviors.
3. Nursing Diagnosis: step three of the nursing process which involves the formulation of statements that interpret data about the adaptation status of the person, including the behavior and most relevant stimuli
4. Goal Setting: the fourth step of the nursing process which involves the establishment of clear statements of the behavioral outcomes for nursing care.
5. Intervention: the fifth step of the nursing process which involves the determination of how best to assist the person in attaining the established goals
6. Evaluation: the sixth and final step of the nursing process which involves judging the effectiveness of the nursing intervention in relation to the behavior after the nursing intervention in comparison with the goal established.

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III. ASSOCIATE DEGREE NURSE COMPETENCIES

The National League of Nursing competencies for entry into practice function as the standard for the expected behaviors that senior students will demonstrate at completion of the nursing program. Proficiency level of each competency progresses as the student progresses in the nursing program.

TABLE 2: Leveling of Student Learning Outcomes

1 st Semester Level I	2 nd Semester Level II	3 ^{rd/4th} Semesters Level III	4 th Semester Preceptorship
1. <u>Relate</u> the components of the nursing process to the delivery of nursing care for the adult client.	<u>Utilize</u> the nursing process in the delivery of nursing care for the adult client and family.	<u>Apply</u> the nursing process to individuals and groups across the lifespan and in various developmental stages.	<u>Integrate</u> the nursing process to promote adaptation of individuals and groups in each of the four modes: physiologic, self-concept, role function, & interdependence.
2. <u>Develop</u> behaviors of professional nursing practice.	<u>Practice</u> professional behaviors within nursing practice.	<u>Display</u> professional behavior standards of nursing practice.	<u>Internalize</u> professional behaviors in the practice of nursing.
3. <u>Develop</u> therapeutic communication skills verbally, non-verbally, and in writing.	<u>Practice</u> therapeutic communication skills verbally, non-verbally, and in writing.	<u>Integrate</u> therapeutic communication skills verbally, non-verbally, and in writing.	<u>Assimilate</u> therapeutic communication skills verbally, non-verbally, and in writing.
4. <u>Identify</u> appropriate resources to formulate clinical decisions that are safe and that moves the adult client and family towards positive outcomes.	<u>Explain</u> rationale for clinical decisions in the provision of accurate and safe nursing care and that moves the adult client and family towards positive outcomes.	<u>Demonstrate</u> clinical decision making that is accurate and safe and that moves the client and family towards positive outcomes across the lifespan and in various developmental stages.	<u>Formulate</u> clinical decisions that are accurate and safe and that moves the client and significant others towards positive outcomes.

1 st Semester Level I	2 nd Semester Level II	3 ^{rd/4th} Semesters Level III	4 th Semester Preceptorship
5. <u>Demonstrate</u> caring interventions that assist clients in meeting their bio-psycho-social needs.	<u>Employ</u> caring interventions that assist clients in meeting their bio-psycho-social needs.	<u>Create</u> caring interventions that assist clients in meeting their bio-psycho-social needs across the lifespan and in various developmental stages.	<u>Integrate</u> caring interventions that assist clients in meeting their bio-psycho-social needs.
6. <u>Determine</u> teaching and learning opportunities for the adult client and family.	<u>Demonstrate</u> teaching and learning processes to promote health and reduce risks for the adult client and family.	<u>Appraise and display</u> teaching and learning processes to promote health and reduce risks for the client and family across the lifespan and in various developmental stages.	<u>Determine</u> teaching and learning processes implemented to promote health and reduce risks for the client and family.
7. <u>Explain</u> client-centered care and role of interdisciplinary team members.	<u>Participate</u> as part of an interdisciplinary team to deliver client-centered care to adult clients and families.	<u>Practice</u> providing care as part of an interdisciplinary team to delivery client-centered care to the client and family across the lifespan and in various developmental stages.	<u>Collaborate</u> as part of an interdisciplinary team to delivery client-centered care to individual and groups.
8. <u>Identify</u> safety factors resulting in providing positive outcomes and resources available for patient care management.	<u>Assist</u> identified adult population in a medical surgical acute care setting toward positive outcomes under the guidance of experts.	<u>Assist</u> clients across the lifespan in a variety of health care settings in the community toward positive outcomes.	<u>Manage</u> health care to assist client toward positive outcomes.

Adapted from,

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