

Nursing in Context – NURS 394
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About the Instructor.

Bev Williams RN, PhD is a faculty lecturer in the Faculty of Nursing at the University of Alberta (Edmonton, Alberta, Canada).

Williams received her BScN, MN and PhD from the University of Alberta. She has 27 years of teaching experience in higher education with clinical practice in the areas of pediatrics, orthopedics, neurosurgery, plastic surgery, general surgery and community health.

Williams has been involved in PBL since 1993. She and a colleague developed the 1996 proposal for a curricular change to an integrated PBL undergraduate nursing curriculum which was subsequently accepted by the University of Alberta administration. Currently, she is the Curriculum Coordinator, member of the Curriculum Evaluation Committee and mentor to faculty who are learning to facilitate PBL. She has acted as a consultant to provincial nursing faculty contemplating a shift to a PBL undergraduate curriculum.

Williams is a member of the Alberta Association of Registered Nurses, the Canadian Nurses Association, past president of the Western Region Canadian Association of University Schools of Nursing, Eligibility Chair and Faculty Counselor for Mu Sigma Chapter of Sigma Theta Tau International and member of the University of Alberta Teaching and Learning Committee. She has presented research and scholarly papers at the provincial, national and international levels and has publications on topics including critical thinking, self directed learning, critical reflection and PBL. In 2000 she was awarded the Mu Sigma Chapter Novice Researcher Award and the Faculty of Nursing Excellence in Undergraduate Teaching Award.

Recent publications:

Day, R & Williams, B (in press). Developing critical thinking through problem based learning: A pilot study. *Journal of Excellence in College Teaching*.

Williams, B (2001). Developing critical reflection for professional practice through problem based learning. *Journal of Advanced Nursing* 34 (1), 27-34.

Williams, B. (2001). The theoretical links between problem-based learning and self directed learning. *Teaching in Higher Education* 6 (1), 85-98.

Introduction

Institutional

Name of college or university: University of Alberta (Edmonton, Alberta, Canada)

Total enrollment: 41,000 (full time and part time students)

Public or Private: Public

Carnegie Classification: Doctoral/Research Universities - Extensive

Individual

School: Nursing (<http://www.nursing.ualberta.ca>)

Department: N/A

Faculty Rank: Faculty Lecturer

Highest degree earned: PhD, RN

Number of years teaching at the college level: 27

Awards received for excellence in teaching: Faculty of Nursing Undergraduate Teaching Award

Course

Course name: Nursing in Context C1

Course abbreviation and number: NURS 394

Number of semester, credit hours: second term, 63 hours

Catalog description: Continuation of NURS 390 with increasing situational complexity. The goal of this course is to continue development of concepts of health, health promotion, professional nursing and human responses across the lifespan. The focus remains on the care of clients (individuals, families, groups) in institutions and communities who are experiencing acute and complex variations in health.

Number of students: 48

In what year do students enroll in this course: 3rd year (junior)

This course is best described as: required course for majors

Problem Based Learning

Percentage of this course that uses Problem Based Learning: 100%

Length of time teaching the course using PBL: 3 years

Designation as a PBL course: Calendar description of course, Faculty of Nursing information brochures

Part II: Design of the Course

Rationale

In addition to integration of evidence based knowledge from nursing, arts, humanities, medical and social sciences, graduates of the undergraduate nursing program are expected to use informatics, apply legal and ethical principles, think critically, collaborate, deal with ambiguity and diversity, lead, manage, and engage in social/ political action and lifelong learning. Program evaluation data over several years revealed areas of repetition, some gaps and little integration of content in our previous subject based curriculum. In addition, students and graduates indicated that they felt less than confident in their clinical decision making abilities and their abilities to engage in evidence based practice and to demonstrate basic leadership and management skills. Employers were ranking graduates demonstration of sound clinical judgment in practice as 10th out of 16. Clearly, our traditional approach to nursing education was not achieving the outcomes we anticipated. After much discussion and debate, faculty decided to adopt a PBL approach to the entire undergraduate program.

Learning processes and learning outcomes are addressed equally during PBL. Socialization into the discourse and practice of nursing as a discipline is more effectively accomplished. The documented outcomes of PBL interface well with the outcome competencies of our undergraduate nursing program. These outcomes include an enhanced ability to: access information and resources and critically appraise evidence; think critically and collaborate using communication and team building skills; continually assess self and others; and engage in continuing education through self directed learning. Although, the faculty teaching in the undergraduate program are engaged in PBL; each tutor has their own unique style of tutoring.

The theory underlying PBL supports my beliefs that learners want to do their best and will do so if they know they are being challenged in a supportive environment, when they feel in control of the learning process, if they are actively involved in the learning process, when they receive feedback about their involvement and when they feel the content is relevant. My role as teacher is to create a supportive environment, encourage inquiry through critical scrutiny of assumptions, values and behaviors, provide helpful feedback, and draw attention to the connection between concepts and the relationships of theory

to practice. I consider myself a resource with specific expertise and a consultant who can guide learners to meet course and program outcomes.

Reflective Essay on the Content of the Course

NURS 394 content is common to all sections of the course and students learn it over a six week period by studying five learning packages: "Nursing Organizations", "The Jacobs", "The Webbs", "Matt Boychuck", and "The Inmates". Each learning package consists of some general learning goals, a brief description of an authentic nursing practice situation and a variety of suggested resources for relevant support course concepts inherent in the situation. Students must research evidence based nursing information on their own. Specific concepts from nursing and support course disciplines are integrated into each of the learning packages and the ones that I focus on are outlined in the following descriptions.

Through studying "Nursing Organizations", students are encouraged to consider how nursing and nursing education are organized at the local, national and international levels and how the professional organizations interface with governments at all levels. They also discuss practice standards, continuing competency, balancing nursing labor supply and demand, collective bargaining and entry to practice issues.

Students encounter a family experiencing a high risk pregnancy with "The Jacobs." They discuss causes of high risk pregnancy, premature birth, ethical issues related to right to life, patient advocacy and parental and sibling grief related to an infant death.

"Matt Boychuck" introduces the students to trauma care of an adolescent involved in an alcohol related motor vehicle accident. Students discuss rural versus urban health care, life threatening neurological and musculo-skeletal injuries, levels of prevention and success of preventative programs. In addition they are faced with how to deal with issues of life support, sudden death and organ donation.

"The Webbs" are an elderly couple who have a number of chronic health concerns. Students examine the issues of a family with adult children caring for their frail elderly parents. They discuss homecare nursing, caregiver burden, elder abuse, respite care, decision making related to institutionalization, and how to conduct a family meeting. The fifth learning package "Inmates" will be discussed as an example in Section D.

When I first started to tutor, I tended to guide the students to discuss pathophysiology, pharmacology, and general nursing care through my questioning. In a very short period of time I realized that they would do this on their own and what they needed help with was professional practice integration and application. The following are examples of the types of questions I might ask related to the learning packages: "As the RN in charge on evenings, what would you need to know in order to effectively delegate activities to the two licensed practical nurses who are working with you? How would you inform the Jacobs of the hospital policy regarding resuscitation of infants with a birth weight below 500 grams? How would you respond to Matt's mom when she tells you that she and Matt discussed organ donation when he received his driver's license? Who should initiate discussion about organ donation if the family does not? How? Could the Webbs benefit from a family meeting? How would you conduct one, who would you invite, what observations might you share, and what questions might you ask?" It is this type of questioning, I believe, that has prompted students to comment that I encourage them to "think why things are the way they are" and "dig deeper to understand." Please note that all quoted student comments related to the course and tutor are derived from my final NURS 394 course evaluations.

C. Reflective Essay on Instructional Practice

It is important for me to get to know each of my learners personally and for them to get to know one another at the beginning of our teaching-learning relationship. During the first tutorial learners are asked

to interview one of their classmates and then introduce that person to the group. Learners as a group interview me as their tutor.

I prepare myself for tutorial interaction by reviewing the learning goals for the current learning package, ensuring that I know how they interface with the course and curriculum as a whole. I often review content theory and the most recent professional literature that pertains to the current topics that learners have identified. I think generally about questions I might ask the learners to challenge their understanding and stories I might share. Learners comment that I am "knowledgeable and well prepared" for tutorial discussions and am able to "assist them in understanding complex concepts."

It is an ongoing challenge for me to find different ways to ensure relevancy of content and consistent learner control and involvement especially while considering the various learning styles among learners. It is important that learners in nursing develop the ability to think critically in order to arrive at sound clinical judgments. Initially, I used questioning almost exclusively. Over time I have developed a repertoire of strategies to use with PBL. These include *questioning* (e.g., what do you already know about this situation? How do you know ---? Why do you think ---? Is there a relationship between ---- and ----?), *role playing* (You are the nurse in this situation. What will you do/say? How will you respond if I say ---?), *challenging with hypothetical situations* (What are the possible outcomes? What would happen if ---?), *sharing stories and poetry* from popular and professional literature as well as stories from my own professional practice. Learners respond that they "feel respected, look forward to tutorial, even at 0800, and are stimulated to get involved." They consistently report how much they appreciate the questions that I ask to help "challenge the depth of their understanding and their ability to apply what they are learning to actual practice." Learners indicate that when I encourage them to "actively engage in critical thinking", they feel "confident that they are meeting the learning goals for the course and for the program" while still pursuing theory that is relevant to them. They indicate that within the structure of PBL I have achieved the essential balance between "telling them nothing" and "telling them everything." It has taken me some time to reach this balance. Learners who I tutored in second year and subsequently in third year commented that "I was more a part of the group less reserved and controlled my non-verbal communication better!!"

One of the most challenging aspects of teaching is helping learners continue to develop by giving feedback that recognizes the strengths of each individual as well as the areas that each learner can develop further. There is an art to providing this kind of feedback publicly to learners and to help them develop the skill to provide direct and honest feedback to each other in a public forum. I sometimes find myself pondering how best to share my thoughts and suggestions to ensure that the students' self confidence remains intact. It is very important that they understand that I am commenting in writing and/or verbally because I value each of them and want to help them become the best that they can. I consider myself a role model and coach as well as someone who is there to support them if they need it. Learners have commented that they have "grown so much through the feedback" and "for the first time are able to provide feedback to colleagues and significant others in their personal lives."

D. PBL Context and Application

The nursing program is in its fourth year of operation and is implementing a hybrid model of PBL. The specific hybrid model is a structure where nursing course content is completely integrated and support course content is offered concurrently in a traditional didactic manner.

Allocation to tutorial groups is arbitrary as it occurs through the traditional university system of registration. Tutorial groups consist of ten to twelve learners and a faculty tutor. Typically, tutorial groups meet for two hours on Monday, Wednesday and Friday of each week. Usually one half of the first tutorial is spent establishing group norms that reflect how the group decides they want to operate. Students decide what their expectations are in relation to such aspects as tardiness, absenteeism, preparation, workload distribution, use of a variety of resources, creative sharing of information, handouts, and frequency of evaluation (daily or weekly).

The following is a sample learning package situation:
LP 3.2.5 "Inmates"

Learning Goals:

This learning package is designed to introduce learners to the application of principles of program planning for inmates in a correctional institution. Learners will be able to explore values, beliefs and strategies for working with clients and aggregates that are experiencing addictions, HIV, and TB.

Scenario:

You are employed as a registered nurse in a correctional institution for male offenders. This institution has 600 inmates, is located close to a major highway and is 30 kilometers from a city of 60,000 people. The following (2 out of 4) descriptions have been drawn from the current population in this institution:

Jaime (21) grew up on a farm in Saskatchewan. He did not use drugs or alcohol when he was growing up. He moved to Calgary when he was 18 and began to use marijuana heavily. Jaime committed several robberies and was apprehended. He has approached you saying "There's a bunch of guys in here that I know have HIV and hepatitis. I'm terrified of them and I'm not the only one who feels this way".

Tom is a native Canadian who has been using drugs and alcohol for many years. He has always used clean needles until he began living with Mary and sharing 'rigs'. Although Tom didn't know it, Mary was HIV positive. He didn't find out that he was HIV positive until he asked to be tested in jail because he was suffering from night sweats.

During initial tutorials, learning is stimulated by "brainstorming" or verbal exploration of the situation outlined in the learning package. Existing knowledge about the situation is discussed and through guiding and challenging questions from the tutor, deficits in learning are identified. For example, in relation to the inmates, I might ask:

What do you already know about HIV?

What will you say to Jamie? How does your response reflect your values?

What does society say about providing inmates with condoms and clean needles?

How do we differentiate risk behaviors from risk groups? Why is this important?

Do health care personnel have legitimate reasons for knowing if someone is HIV positive? Do patients have to disclose their HIV status to health care personnel / employers?

With further guidance from the tutor learners are able to clearly identify their learning needs and discuss relevant resources that could be used to help them learn unfamiliar information. Students use the learning time between one tutorial and the next to engage in self directed study, exploring issues either in pairs or independently.

During a follow-up tutorial written information is distributed to members of the tutorial group and discussed in relation to the situation identified in the learning package. This process provides an opportunity to evaluate the quality of the information, credibility of resources used to retrieve the information, creativity used in sharing the information and the students' understanding of the situation and their role as professional nurses within the situation.

An optional weekly resource session, which takes the form of a guest/faculty lecture/discussion, is offered to students. These sessions provide an opportunity for students to extend their knowledge about the particular situation under study and students often bring specific queries prompted by the current situation under discussion. For example, with the Inmates, we have had the HIV clinical nurse specialist from the hospital and an HIV positive volunteer at a correctional institution come to speak to the students and answer any questions they might have.

Subsequent to the discussion associated with a single learning package (usually weekly), students engage in self reflection and reflection on peer and tutor participation in the tutorial process. Following tutor role modeling, students are encouraged to offer constructive criticism of themselves and their colleagues in the areas of critical thinking, communication and respect, self direction and group process. Learners will often pick names at the beginning of each scenario, watch the chosen individual closely for the week and then during tutorial they will provide both written and verbal feedback to the individual. The written feedback becomes evidence that each learner can use when doing their own written self evaluation at both mid-term and final evaluation times.

In order to facilitate the development of leadership and management skills, learners typically pair up and assume responsibility for a single learning package. With tutor coaching, they will guide the initial brainstorming session, ensure that all learning needs have been identified and assigned, guide subsequent discussions, follow up on new learning needs and guide evaluation.

Formal NURS 394 course evaluation is based on the following requirements: 1) Tutorial group participation: 30%, 2) Exam: 40% and 3) Paper: 30%. To arrive at a tutorial participation grade, students rank themselves and are ranked by me in the following areas: critical thinking, communication and respect, self direction and group process. Each area includes specific criteria (Appendix A). Through self evaluation, students must provide specific examples of their tutorial behavior as evidence of having met the criteria and I would do the same. Generally, the tutorial participation marks within a single tutorial group reflect a range of skill and ability (11-19 out of a possible 20 marks).

The NURS 394 exam includes multiple choice questions (MCQ), as well short and long answer questions. As a reflection of PBL, each series of MCQ is preceded by a short description of a client/patient situation. A sample long answer question might be:

You are the only nurse in a First Nations community without a physician. Since your arrival a month ago, you have observed that many adults are unemployed. When you pass them on the streets, they will not meet your gaze and the smell of alcohol is evident. During your first visit to the school, the Grade 5 teacher (Ms Lewis) expresses concern that she thinks some of her students are experimenting with alcohol and solvents. She asks "What can we do?"

First, how will you respond to Ms Lewis? Then, using the Population Health Model, outline how you will determine the issues of priority for the school/community and how you respond to identified needs.

Paper topics usually focus on a current issue related to health care and the implications of the issue or solutions for professional nursing. Critical analysis discussion requires identification of the issue, an outline of possible solutions, pros and cons of each solution, arrival at an informed conclusion and implications for the nursing profession. In order to facilitate the development of skills of political and social action, part of the assignment is to correspond (letter, letter to editor) with individuals who either are influenced by the issue/solutions or have some influence over the issue/solutions.

Part III: Student Understanding

Evidence of students meeting the learning objectives

Students have been very creative in using resources and sharing information with their colleagues. Increasingly, I find the majority of students will use at least 2-3 resources however, only about half of any group will use evidence based references. Many students comment that "they are using more resources than they ever have before including other degrees." Almost all students will try to demonstrate creativity in sharing their information.

The following are examples of their work:

A telephone interview with a nurse that worked at a correctional institution. The following is a sample of questions that she asked: "Can you describe your role as nurse and how the scope of your practice is

influenced by your environment? What are the challenges/rewards of working with this type of high risk population? What are the effects of the institutionalization on health? What types of health promotion strategies are utilized within the institution for inmates/staff? There is much debate in the literature about protecting confidentiality. In your experience should staff be informed about the HIV status of inmates? Should other inmates be informed?

Retrieval of a Federal Report on HIV and Prisons. Based on the report, the student was able to provide current information on the incidence and prevalence of drug addiction, HIV and TB, HIV testing, educational programs, issues of confidentiality, a candid description of the inmate social system, and incidence of violence and exploitation to her peers.

A poem written by a gentleman with early onset dementia.

An extensive list of credible web sites for explaining death to a child.

A model (plastic bag filled with 415 grams of water in a light stocking) of a 28 week old SGA infant.

Six Pre and post test quizzes for their classmates.

Students have demonstrated thoughtful, reflection in their self evaluations. For example:

"I do ask the group questions (CFIM topic) to promote discussion but I would like to facilitate more discussion and also be more creative when sharing my information. I can be more alert to the cues of others' lack of understanding and at times I need to wait for others to finish speaking before I begin. I can work on giving more constructive feedback – the feedback I give tends to be only positive."

Students are able to provide direct, honest feedback to each other even though they still find it "uncomfortable." For example:

"I appreciate your attentiveness to others when they are speaking. Your information is complete. Although you read points off your sheet, you elaborate on the topics by asking questions to stimulate discussion. I encourage you to speak up more in class – we all have a responsibility to each other to contribute in order to maximize our learning and critical thinking."

Although the following represents a conclusion to a paper graded as "excellent", it is still a struggle for many students to clearly and logically identify an issue, outline possible solutions including the pros and cons of each, arrive at an informed conclusion and identify the implications for the nursing profession. On one hand, physicians as gatekeepers of the health care system have served Canadians well. Continuous, comprehensive care has been maintained. On the other hand, accessibility to health care and the individual's right to self determination in choice of health care practitioner have been violated and interdisciplinary/inter-sectoral collaboration has been minimal. The individual's right to self determination in maximizing use of the nation's health care resources; make it imperative that barrier free multiple entry points to the health care system, be optimized. Legislative changes and health care reform are necessary. Nurses have an obligation to become politically active in order to ---.

The multiple choice questions used on NURS 394 exams are comparable to those I used for a case based course that I taught in the traditional program. The mean range for learners in the traditional course was 66-68% and the mean range for PBL students on the same questions was 68-77%. Clearly, PBL students are learning content considered relevant.

At the end of NURS 394 students can be hired by the hospital and community as senior nursing students. Prior to being hired by the Regional hospitals, students must undergo an assessment of their ability to make clinical decisions. Results from the most recent assessments indicate that the students at the end of year three in the PBL program scored "strong" in clinical decision making as often as the end of year four students in our traditional program. A summary of unsolicited comments from employers of senior nursing students includes the following: "These students are different. They are confident and well grounded in practice, resourceful, doing research to verify questions about practice, and are aware of their limitations but can also identify how to remedy any deficiencies."

Reflection on the Evidence of Student Learning

At the end of NURS 394, student achievement of the third year level outcomes and the documented outcomes of PBL is evident. In their self/course evaluations students provide evidence to support their descriptions of themselves as developing the characteristics of self directed learners as outlined in the literature. They recognize the sense of responsibility they are developing in being able to work with others. Students indicate they are confident in their ability to identify their learning needs, select and use a variety of resources, choose relevant information and share their information in creative ways. They acknowledge that they are learning how to effectively question each other, deal with ambiguity and value a diversity of viewpoints. Students comment that through regular self and peer evaluation they are developing a deeper awareness of themselves and others and are increasingly able to communicate their observations of each other. Finally, students indicate that they are developing the skills that will enable them to continue to learn once they are practicing professionals. As one student said "I don't know too much about --- but if there is one thing I learned from the program, it is that I know how to learn." I am currently engaged in a study using Gugliemino's Self Directed Learning Readiness Scale (1977/1978) that will compare students' self directed learning readiness at the beginning and end of the first year in the program.

Students demonstrate the ability to think critically when making clinical decisions as confirmed by their comments on self/course evaluations, their answers to exam questions, their scholarly papers and the clinical decision making assessment completed prior to them being hired as senior nursing students. A colleague and I are currently engaged in a study using Facione and Facione's Holistic Critical Thinking Rubric (1994) that will compare students' critical thinking abilities at the beginning and end of the four year undergraduate program.

Confirmatory evidence is clearly present in employers' comments about the senior nursing students. They confirm the students' levels of confidence and self awareness, the students' abilities to integrate knowledge in making clinical decisions and their ability to use research to answer clinical questions.

Part IV. Reflective Summary of the Course

Graduates of the undergraduate nursing program are expected to integrate evidence based knowledge from nursing, arts, humanities, medical and social sciences as well as use informatics, apply legal and ethical principles, think critically, collaborate, deal with ambiguity and diversity, lead, manage, engage in social/ political action and lifelong learning in their professional practice. PBL is used in NURS 394, the final nursing course in third year, to facilitate student achievement of associated level outcomes.

The evidence strongly suggests that at the end of NURS 394 students generally have achieved the level outcomes. In their self/course evaluations, students provide evidence to support their descriptions of themselves as developing the characteristics of self directed learners outlined in the literature. They recognize the sense of responsibility they are developing in being able to work with others. Students indicate they are confident in their ability to identify their learning needs, select and use a variety of resources, choose relevant information and share their information in creative ways. They acknowledge that they are learning how to effectively question each other, deal with ambiguity and value a diversity of viewpoints. Students comment that through regular self and peer evaluation they are developing a deeper awareness of themselves and others and are increasingly able to communicate their observations of each other. Finally, students indicate that they are developing the skills that will enable them to continue to learn once they are practicing professionals.

Students demonstrate the ability to think critically as confirmed by their comments on self/course evaluations, comparative results of exam responses, their scholarly papers and the results of the clinical decision making assessment done prior to being hired as senior nursing students. Confirmatory evidence is clearly present in the following comments from employers of senior nursing students: "These students are different. They are confident and well grounded in practice, resourceful, doing research to verify questions about practice, and are aware of their limitations but can also identify how to remedy any

deficiencies in knowledge they might have." While program outcomes have been very positive, implementing a PBL program does present challenges.

An ongoing challenge in implementing a PBL program is tutor development. We are fortunate to have a Director of Teaching in the Faculty of Nursing who plans formalized tutor development sessions twice annually and also meets with faculty on an individual basis. Another challenge that faces us is how to balance faculty workload and maintain PBL in an era of fiscal restraint. This generally translates into increasing the number of tutorial groups that each tutor has. We are trying to work with a principle of maintaining a smaller ratio of tutorial groups to tutor in the first two years of the program and then increasing that ratio in the third and fourth years once students have developed their own skill in facilitation.

References

Facione, P.A., & Facione, N.C. (1994). Holistic critical thinking scoring rubric. Millbrae, CA: California Academic Press.

Guglielmino, L. (1977/1978). Development of the self directed learning readiness scale. Unpublished Doctoral Dissertation. University of Georgia.

Appendix A
Faculty of Nursing
Guide for Evaluation
Student Performance in Tutorial and Lab

Guide to Grading:

5 = Exceptional, 4 =Above Average, 3 = Expected, 2 = Marginal Pass, 1 =Unsatisfactory

Student Performance Abilities

Critical Thinking and Problem Solving

1. Shares research content in each scenario that:
 - a. is obtained from a variety of references including: textbooks, other-than-text books relevant to research area, peer-reviewed journals, agency materials, the web
 - b. is relevant to the learning goals & course objectives.
 - c. addresses the area to be researched in depth
2. Facilitates discussion to promote an understanding of the content area by:
 - a. being able explain, explores & utilize key concepts with precision & supporting rationale
 - b. developing the topic under exploration by asking the group critical thinking questions
 - c. demonstrating creativity in sharing information
3. Independently promotes deeper understanding of subject within a group discussion by:
 - a. verbally reflecting on content
 - b. raising significant points and/or asking relevant questions
 - b. proposing related concepts/ideas
 - c. using information that supports claim; considers alternative information that offers contradictory evidence
 - d. openly examining own & alternate points of view for strengths & weaknesses in addressing the subject, problem or question at hand.
4. Uses an obvious decision-making process to verbally:
 - a. identify, justify &/or discard assumptions, myths & differing points of view
 - b. make reasonable inferences & conclusions & explores possible strategies to address question or issues

- c. differentiate between opinion & fact
- 5. Participates in discussions of professional/ethical/moral issues

Self Direction

- 1. Independently identifies ways to promote personal development in tutorial setting, i.e.,
 - a. identifies own strengths & limitations that affect group & individual learning
 - b. sets goals & objectives
 - c. follows through with personal development plans
 - d. evaluates progress with examples
- 2. Collects & validates information gathered to conduct self-assessment throughout tutorial process, at midterm and final evaluation of tutorial
- 3. Explores how own behaviours affect ability of group to function during evaluation of group process
- 4. Responds to fair evaluative comments from others in accepting manner without becoming defensive, blaming others, being negative
- 5. Demonstrates understanding of differences between tutor-directed & self-directed learning; views tutor as facilitator & additional resource.
- 6. Identifies self assessment of learning & possible gaps in knowledge
- 7. Completes assigned tasks as presented in course outline
- 8. In the event of an absence, notifies tutors prior to tutorial or lab

Communication & Respect

- 1. Shares information clearly
- 2. Is alert to cues of 'lack of understanding' in others & responds
- 3. Verbal/non-verbal behaviour recognizes presence of all others in tutorial group, i.e.:
 - a. Speaks directly to group members
 - b. Actively listens & responds to others with respect
 - c. Waits for others to finish speaking before beginning to speak
 - d. Gives others the opportunity to speak as much as self
- 4. Utilizes a variety of strategies for effective communication within the group such as: asking open-ended questions, paraphrasing, clarifying assumptions/misunderstandings, focusing, summarizing, etc.
- 5. Verbal/non-verbal behaviour recognizes the rights of others to express own views without being put down
- 6. Maintains confidentiality of information & experiences shared in tutorial, lab, & fixed resource sessions

Group Process

- 1. Is punctual & present for all tutorials, & labs
- 2. Contributes to the development/maintenance of group objectives/norms
- 4. Assumes an active, functional role in group discussions, both verbally & non verbally
- 5. Relates to peers collaboratively & as resources for learning
- 6. Assumes a leadership role in CBL both formally & informally by:
 - a. helping to keep the group task oriented
 - b. encouraging/facilitating participation of others
 - c. fostering group discussion
 - d. assisting group members in their learning
 - e. recognizing & responding to verbal & non-verbal communication that impedes group process
 - e. taking constructive action to resolve individual & group concerns and conflicts
- 7. Takes part in the evaluation of CBL group process work that involves self & other group members.
Gives feedback to others that is:
 - a. constructive (positive and developmental in nature)

- b. in depth, meaningful
- c. honest and direct