

Teaching Guide of the subject	Year 2026 - 2027
PRACTICUM VIII	
Code: 108303	
ECTS credits: 12	

Qualification	Types	Course	Semester
2500891 Nursing	OB	4	1-2

Contact	Use of languages
<u>Responsible:</u> Ramos Fernández, Adelaida ARamosF@santpau.cat <u>Teaching staff:</u> Ramos Fernández, Adelaida ARamosF@santpau.cat	Group 1 : Catalan

Prerequisites

You must have passed at least all the first-year subjects and a total number of 120 credits in the first three years.

In order to carry out the clinical practice, the student must have signed the confidentiality commitment, the clinical practice collaboration agreement and have provided a negative certification from the Central Register of Sexual Offences, as indicated by the regulations published by the UAB, in April 2016, which must be complied with, according to article 13.4 of the Organic Law on the Legal Protection of Minors.

Contextualisation and objectives

This subject is part of the subject External Internships and is planned in the eighth semester of the Bachelor's Degree in Nursing. It is oriented towards professional practice, it is of an integrative, rotating nature and also allows to deepen and reinforce those learnings that are considered necessary to consolidate the learning results of the subject. Supervised internships are a fundamental element for the development of professional skills in nursing and are intended to facilitate the integration of theoretical knowledge, skills and attitudes specific to the degree, as well as to guide students in their process towards professionalization.

Practicum VIII is linked to the set of subjects, theoretical and practical, of the degree, which allows the incorporation of professional values, reasoning and clinical judgment, clinical management and the different learning outcomes of communication as well as those related to the education, care and care of people during the processes of health - disease.

The program is developed in different areas of action of the nurse, allows the care of people at different times

of the life cycle (children, adults, old age) and in situations of health and illness.

This practicum includes a weekly stay, planned in a different environment from the previous practices, led by a nurse (Methodology and Care Management, Quality of Care, Research, Nursing Consultations, Extractions, Diagnostic Imaging and Nuclear Medicine, Management, etc.).

The [Clinical Practice Framework Document](#) and the regulations section of the [Student Guide](#) include information and documentation in relation to clinical practices. It is necessary that the student has read this documentation before taking the subject.

Learning objectives of the subject

1. Integrate knowledge, skills and attitudes associated with the practitioner's learning outcomes, incorporating professional values, care communication, clinical reasoning, clinical management and critical judgment.
2. Use the nursing care process as a scientific methodology to ensure well-being, quality and safety.
3. To provide comprehensive care to the individual, family and community, with quality and evidence-based.
4. Carry out techniques and procedures establishing a therapeutic relationship with patients and families.
5. Reflect on and on practice with the theoretical and practical references acquired.
6. Actively participate in multidisciplinary teams, taking on responsibilities and developing leadership and collaboration skills to ensure comprehensive and coordinated care.
7. To apply health promotion and education strategies that encourage self-care, prevention and the active participation of people in their health process.

Learning outcomes¹

Learning Outcomes of the TITLE (RAT)	LEARNING OUTCOMES OF THE SUBJECT (RAM)
ST01. Design systems for organising care aimed at individuals, their families or the community.	SM11. Design systems for the organisation of care aimed at individuals, their families or the community (ST01).
ST02. Design nursing care, exchanging information, resolving difficulties, assuming responsibilities and contributing to the integration of processes and continuity of care.	SM19. Design nursing care by exchanging information, resolving difficulties, assuming responsibilities and contributing to the integration of processes and continuity of care (ST02).
ST03. Plan nursing care aimed at individuals, their families or the community and oriented towards health outcomes.	SM36. Plan nursing care aimed at people, their families or the community and oriented towards health outcomes (ST03).

¹ "The learning outcomes of the subject External Practice will be worked on and evaluated throughout the different practicums depending on the context and scope where each of the practicums are developed. Throughout the development of the clinical practice stays from 2nd to 4th year, their achievement will be ensured"

ST04. To make clinical judgments, based on clinical and care practice guidelines and applying diagnostic and therapeutic reasoning in the provision of care.	SM01. Use scientific evidence data (ST04) in professional practice. SM37. Develop clinical judgments, based on clinical and care practice guidelines and applying diagnostic and therapeutic reasoning in the provision of care (ST04).
ST05. To analyse the interactive behaviour of people according to gender and other social determinants, taking into account their implications in health and disease processes, in a social and multicultural context.	SM06. To analyse the interactive behaviour of people according to gender and other social determinants, taking into account their implications in health and disease processes, in a social and multicultural context (ST05).
ST06. Identify physical, psychological and social problems arising from abuse throughout the life cycle, especially in childhood and old age, acting in favour of prevention and early detection for care, as well as in rehabilitation.	SM38. Identify physical, psychological and social problems derived from abuse throughout the life cycle, especially in childhood and old age, acting in favour of prevention and early detection for care, as well as in rehabilitation (ST06).
ST07. Identify physical, psychological and social problems derived from gender violence, acting in favour of prevention and early detection for the assistance and rehabilitation of women victims of gender violence.	SM39. Identify physical, psychological and social problems derived from gender violence, acting in favour of prevention and early detection for the care and rehabilitation of women victims of gender violence (ST07).
ST08. Select the uses, indications and mechanisms of action of the drugs and medical devices that the nurse may prescribe or indicate, in accordance with current legislation.	SM04. Select the uses, indications and mechanisms of action of drugs and medical devices that can be prescribed or indicated by the nurse, in accordance with current legislation (ST08).
ST09. Use the technologies and information systems available in the health and social system with the aim of obtaining relevant data and information to implement quality nursing care.	SM40. Use the technologies and information systems available in the health or social system with the aim of obtaining relevant data and information to implement quality care (ST09).
CT01. To apply comprehensive and continuous nursing care in health and social environments that guarantees the health and well-being of people, their families or the community, based on the available scientific evidence, clinical practice guidelines and current legislation, to guarantee well-being, quality and safety.	CM28. To apply comprehensive and continuous nursing care in health and social settings, which guarantees the health and well-being of people, their families or the community, based on the available scientific evidence, clinical practice guidelines and current legislation, to guarantee well-being, quality and safety (CT01).
CT02. Apply comfort measures and health technologies in the final stage of people's lives, in home, health and social environments.	CM21. Apply comfort measures and health technologies in the final stage of people's lives, in home, health and social environments (CT02).
CT03. Act in life-threatening situations according to clinical practice guidelines.	CM25. Act in life-threatening situations according to clinical practice guidelines (CT03).
CT04. To establish a relationship without prejudice with people, considering their	CM29. Establish a relationship without prejudice with people, considering their physical, psychological and sociocultural aspects, ensuring respect for their

physical, psychological and sociocultural aspects, ensuring respect for their opinions, beliefs and values, and guaranteeing their right to privacy through confidentiality and professional secrecy.	opinions, beliefs and values and guaranteeing their right to privacy through confidentiality and professional secrecy (CT04).
CT05. Establish respectful, assertive and effective communication with people, their families and teams of health professionals.	CM26. Establish respectful, assertive and effective communication with people, their families and teams of health professionals (CT05).
CT06. To promote the right to information, participation and the promotion of autonomy in decision-making by the people served, in accordance with the way in which they experience their health and illness process.	CM11. Promote the right to information, participation and promotion of autonomy in decision-making of the people served, in accordance with the way they experience their health and illness process (CT06).
CT07. Use health promotion and education strategies in health and social settings that encourage self-care and preventive and therapeutic behaviours, favouring the health and well-being of community members and minimising suffering, risks and disabilities.	CM30. Use health promotion and education strategies in health and social environments that encourage self-care and preventive and therapeutic behaviours, favouring the health and well-being of community members and minimising suffering, risks and disabilities (CT07).
CT08. Work in health and social environments in collaboration with other professionals, forming multidisciplinary and interdisciplinary teams to improve the health and care of individuals, groups or the community.	CM27. Work in health and social settings in collaboration with other professionals, forming multidisciplinary and interdisciplinary teams to improve the health and care of individuals, groups or the community (CT08).
CT09. To develop the leadership of nurses in care and in teams within the health and social system.	CM31. To develop the leadership of nurses in care and in teams within the health and social system (CT09).

Contents

Prior to the start of the practice, information is provided on the development and organization of the subject. All the documentation and circuits that are established between all the agents are reviewed; the planning is closed and the Specific Internship Agreement is signed.

Clinical practice

Clinical internships allow the student to integrate into real scenarios. Interact with multidisciplinary teams, make direct contact with patients and take care of them, as well as understand the care circuits and processes. The care of the clinical process is worked on together with the care plan. Decision-making, work organisation, social and therapeutic communication are promoted, while technical, procedural and attitudinal aspects are addressed.

Methodology

Supervised activity:

The supervised clinical practices are carried out in different areas of the Barcelona area and its surroundings. Its duration is 8 weeks organized in 2 periods in which the student rotates through different environments.

Each student, during the internship, is assigned to a tutor from the internship center (reference nurse) who assumes a single student throughout the period; An academic tutor (clinical collaborator) monitors the progress weekly. All tutors participate in the formative and continuous assessment coordinated by the person in charge of the programme.

Shifts and schedules:

7.5 hours of daily practice is established in the morning, afternoon, mixed or evening shift, adapted to the care schedule.

These schedules can be modified depending on the needs of the internship center.

Training Activities²

Activity	Hours	ECTS	Learning Outcomes
Type: Supervised Human Care Clinical Practice	291	11,64	SM01,SM11,SM19,SM36,SM37,SM06, SM38,SM39,SM40,SM04, CM28,CM21, CM25, CM29, CM26, CM11,CM30, CM31
Type: Autonomous Personal study, bibliographic consultations and documents. Preparation of works.	9	0,36	SM01,SM11,SM36,SM37,SM06,SM38,SM39,SM04, SM40,CM28,CM21,CM25,CM29,CM26, CM11,CM30, CM27,CM31

Evaluation

The evaluation is formative and continuous. The level of achievement of the objectives and learning outcomes acquired during clinical practices is assessed.

Attendance at clinical practices is compulsory.

The following are involved in the evaluation of the student:

- The tutor of the internship centre (reference nurse) informs about the student's ongoing process.
- The clinical collaborator assesses the monitoring of the student's learning.

² The teaching staff will allocate approximately 15 minutes once the subject is finished to allow that their students can answer the assessment surveys on teaching and subject.

- The student himself, through the memory of the practitioner.
- The academic tutor (lecturer responsible for the subject), responsible for the overall assessment of the student and the grade.

Assessment instruments:

- Report of the tutor of the center (reference nurse)
- Evaluation report of the clinical collaborator.
- Student's report.

The final grade of the subject is obtained from the weighted average according to the percentage assigned to each of the different activities proposed for evaluation. The minimum grade of each part to be able to make the average is a 5 out of 10.

Internship attendance:

Attendance at the clinical practice is mandatory in all the scheduled hours, in the shift and at the assigned time. Justified and unjustified absences from clinical practices must be recovered before the closing of the proceedings. In addition, unjustified fouls carry a penalty in the final qualification.

Justified lack of attendance

- Death of a family member ^{*3}
- Acute illness
- For medical visit: the student is allowed the essential hours to attend the medical visit
- Official exams: the student is allowed all day the exam takes place
- Driver's license exam: the student is allowed the essential hours to attend the test
- Attendance at court *
- For other cases approved jointly by the collaborating entity and the EUI-Sant Pau

Lack of attendance NOT justified

- Those that do not appear on the list

At the end of the subject, for each day of unjustified absence, 1 point will be deducted from the final grade of the practicum subject.

Lack of attendance NOT justified and NOT notified leads to the failure of the subject

³ *No need to recover

Notification of absences from the internships:

- The student must inform the tutor of the collaborating centre (tutor of the institution), the clinical collaborator and the academic tutor (responsible for the subject), and send an email to practiqueseui@santpau.cat of any absence and must present the corresponding receipt. When a lack of attendance is foreseeable, it is necessary to notify well in advance.
- In the case of lack of attendance at internships due to time incompatibility, the student must deliver the Responsible Declaration of time incompatibility to the intern, this document must be communicated and delivered before the start of the internship period that affects.

Qualification

- 0 to 4.9: Suspense
- 5.0 to 6.9: Passed
- 7,0 a 8,9: Notable
- 9.0 to 10: Excellent (in the event that the student has obtained a grade equal to or greater than 9, he/she may opt, at the discretion of the teacher, for an honorary degree).

No evaluable

It is considered that the subject will not be assessable when one of these circumstances is met:

1. Not having delivered any of the continuous assessment activities provided for in the teaching guide.
2. Not having attended any of the practical or compulsory sessions, when these are necessary to assess the specific learning outcomes indicated in the teaching guide.
3. Not having taken the final test (exam, written or oral test, work defense, etc.), if This represents an essential percentage of the grade.
4. Not having completed the minimum required participation in training activities (for example, seminars, presentations, forums, etc.), when these are part of the evaluation.
5. Not having submitted the final project or compulsory project, if this constitutes a central evidence of learning of the subject.

Revision evaluation of the subject

Once the final grade has been published, the student can request the revision in the period determined by the "revision".

Review requests will not be accepted on dates outside the established limit.

Evaluation activities

Activity	Weight	Hours	ECTS	Learning Outcomes
Supervised activity	100%	291	11,64	
Evaluation of the realization of clinical practice				SM19,SM36,SM37,SM06,SM38,SM39,SM40,CM28,CM21,CM25,CM29,CM26,CM11,CM27,C31
• Report of the tutor of the center	45%	9	0,36	SM01,SM19,SM36,SM37,SM04,SM38,SM39,SM40,CM28,CM25,CM21,CM30
• Evaluation report of the Clinical Collaborator	35%			CM27
• Delivery of report (Report)	20%			SM01,SM11,SM36,SM37,SM06,SM38,SM39,SM40,CM28,CM11,CM30,CM31

Procedure in case of copying / plagiarism

1. Copying **or plagiarism** in any type of evaluation activity constitutes a crime, and will be penalized with a 0 as a grade for the subject, losing the possibility of recovering it, whether it is an individual or group work (in this case, all members of the group will have a 0).
2. If, during the completion of an individual assignment in class, the teacher considers that a student is trying to copy or is discovered some type of document or device not authorized by the teacher, the same will be graded with a 0, without the option of recovery, and therefore, the subject will be suspended.
3. A work, activity or exam will be considered to be "copied" when it reproduces all or a significant part of the work of oneself, another classmate.
4. A work or activity will be considered "plagiarized" when a part of a text by an author is presented as one's own without citing the sources, regardless of whether the original sources are in paper or digital format.

The use of Artificial Intelligence (AI) technologies

The use of Artificial Intelligence (AI) technologies is regulated according to the type of work to be carried out:

In the event that the work aims at personal reflection and meaningful learning by the student, **the use of AI technologies is prohibited** in any of its phases of completion.

Any work that includes AI-generated fragments (e.g. abstracts, translations, text writing or image creation) will be considered a lack of academic honesty and may lead to a partial or total penalty in the grade of the activity, as well as greater penalties in cases of seriousness.

Aspects of evaluation related to values and attitudes

1. The teacher may decrease the final grade of the subject by between 1 and 2 points when the student repeatedly does not respect the indications of behavior in the classroom and/or disturbs the normal functioning of the same.
2. "No lack of respect for classmates or teachers will be tolerated. Homophobic, sexist or racist attitudes will also not be tolerated. Any student in whom any of the attitudes described above are detected will be classified as having failed the subject."

Formal aspects of written work

In all activities (individual and group) linguistic correction, writing and formal presentation aspects will be taken into account. It is recommended that before submitting evidence of learning, it is necessary to check that the sources, textual citations and bibliographic references have been written correctly following the regulations of Presentation of works, text recommended by EUI-Sant Pau.

Bibliography

Books:

NURSING DIAGNOSES: DEFINITIONS AND CLASSIFICATION 2021-2023

Author: Nanda Internacional.

Edition: Elsevier España S.L 2021

ISBN: 978-841-382-1276

CLASSIFICATION OF NURSING INTERVENTIONS (NIC)

Autor: Gloria M Bulecheck. FAAN, Howard K Butcher, Joanne M. Docteman and Cheryl Wagner

Edition: 6th edition. Elsevier España S.L 2014

ISBN: 978-849022-4137

NURSING OUTCOMES CLASSIFICATION (NOC)

Autor: Sue Moorhead, Marion Johnson, Meridean L Maas, FAAN and Elizabeth Swanson

Edition: 5th edition. Elsevier España S.L 2014

ISBN: 978-849-022-415

NANDA-I NURSING DIAGNOSES: DEFINITIONS AND CLASSIFICATION 2015-17

Author: Nanda Internacional.

Edition: Elsevier España S.L 2015

ISBN: 978-849-022-9514

NOC AND NIC LINKS TO NANDA-I AND MEDICAL DIAGNOSES: SUPPORT FOR CRITICAL REASONING AND QUALITY OF CARE.

Autor: Johnson M, Mooehead S, Bulecheck GM, Howard K. Buthcer, Meridean L Maas and Swanson E.

Edition: Madrid Elsevier, 2012

ISBN: 978-848-0869-133

NIC LANGUAGE FOR THEORETICAL-PRACTICAL LEARNING IN NURSING.

Author: Rifà Ros R, Olivé Andrados C and Lamoglia Puig M

Edition: Madrid Elsevier, 2012

ISBN: 978-848-0869-454

Software

- Moodle