



# NURS13128 Nursing care for children and their families

## Term 1 - 2018

Profile information current as at 27/09/2024 10:17 am

All details in this unit profile for NURS13128 have been officially approved by CQU University and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

## General Information

### Overview

Infants, children and adolescents are a unique group of individuals who have ever-changing, complex needs different to those of the adult person. This unit will expose you to the theories of child development, the fundamental rights and needs of the child and their families. Assessment and communication skills necessary to care for the child and their families in a range of settings will be explored. You will also review concepts of safety, health promotion and legal and ethical issues in relation to nursing children and their families.

### Details

Career Level: *Undergraduate*

Unit Level: *Level 3*

Credit Points: 6

Student Contribution Band: 7

Fraction of Full-Time Student Load: 0.125

### Pre-requisites or Co-requisites

Pre-requisites Students must have completed 96 credit points and NURS12158 Clinical Nursing Practice 3 or NURS13126 Critical Care Nursing

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the [Assessment Policy and Procedure \(Higher Education Coursework\)](#).

### Offerings For Term 1 - 2018

- Distance

### Attendance Requirements

All on-campus students are expected to attend scheduled classes - in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

### Website

[This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.](#)

## Class and Assessment Overview

### Recommended Student Time Commitment

Each 6-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

### Class Timetable

#### [Regional Campuses](#)

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

#### [Metropolitan Campuses](#)

Adelaide, Brisbane, Melbourne, Perth, Sydney

### Assessment Overview

#### 1. **Written Assessment**

Weighting: 40%

#### 2. **Presentation and Written Assessment**

Weighting: 60%

### Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the [University's Grades and Results Policy](#) for more details of interim results and final grades.

## CQUniversity Policies

**All University policies are available on the [CQUniversity Policy site](#).**

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure – Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure – International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback – Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the [CQUniversity Policy site](#).

## Previous Student Feedback

### Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

#### Feedback from Student evaluations.

**Feedback**

Overall unit content was said to be interesting and relevant to to student learning.

**Recommendation**

Continue to use majority of unit content; update as required.

#### Feedback from Student evaluations.

**Feedback**

A suggestion was given to include lectures in addition to or rather than using the study guide.

**Recommendation**

Reconsider using weekly lectures in the next offering of the unit. Zoom sessions would be preferred so that they can be attended both live and then also be available as a recording.

#### Feedback from Unit coordinator and student evaluations.

**Feedback**

Reconsider design of assessment two where a powerpoint presentation and evaluations were to be converted to word and submitted via turnitin as this was problematic.

**Recommendation**

Although the broad format of the assessment task will remain as the actual task was received well the actual format for submission needs to be re-worked so that students can submit through turnitin without issues.

## Unit Learning Outcomes

**On successful completion of this unit, you will be able to:**

1. Utilise evidence-based practice principles to compare the unique biopsychosocial stages of child development and the impact these have on children and their families
2. Examine legal, ethical and socio-cultural trends and their effect upon the provision of safe collaborative nursing care to children and their families.
3. Discuss cultural awareness principles and family centred care as applied to the nursing care of children and families.
4. Evaluate health promotion strategies at a local, national and international level relevant to the health and wellness of children and their families.

The learning outcomes are linked to the Australian Nursing and Midwifery Accreditation Standards for registered nurses and the Nursing and Midwifery Board of Australia Registered Nurse Standards for Practice.

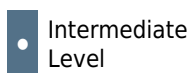
## Alignment of Learning Outcomes, Assessment and Graduate Attributes



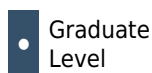
N/A  
Level



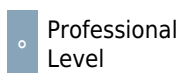
Introductory  
Level



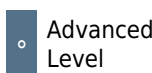
Intermediate  
Level



Graduate  
Level



Professional  
Level



Advanced  
Level

### Alignment of Assessment Tasks to Learning Outcomes

| Assessment Tasks | Learning Outcomes |   |   |   |
|------------------|-------------------|---|---|---|
|                  | 1                 | 2 | 3 | 4 |
|                  |                   |   |   |   |



## Textbooks and Resources

### Textbooks

**There are no required textbooks.**

#### **Additional Textbook Information**

There are no required textbooks. IT Resources You will need access to the following IT resources: CQUniversity Student Email Reliable Internet Unit Website (Moodle)

### IT Resources

**You will need access to the following IT resources:**

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

## Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 6th Edition \(APA 6th edition\)](#)

For further information, see the Assessment Tasks.

## Teaching Contacts

**Kate Crowley** Unit Coordinator  
[k.crowley@cqu.edu.au](mailto:k.crowley@cqu.edu.au)

## Schedule

### **Week 1 - 05 Mar 2018**

**Module/Topic**

**Chapter**

**Events and Submissions/Topic**

### Module One: Professional Nursing Practice

- Topic 1. Discuss the Nursing and Midwifery Board of Australia Codes and Guidelines as it relates to paediatric nursing practice.
- Topic 2. Display knowledge of the legal responsibilities of the nurse relevant to the care of infants, children and adolescent.
- Topic 3. Explore issues pertinent to the scope of paediatric nursing practice.
- Topic 4. Comprehend the function of the family.
- Topic 5. Explore Family Centred Care.
- Topic 6. Identify the different types of families.
- Topic 7. Discuss family theory.
- Topic 8. Undertake a family assessment.
- Topic 9. Develop a genogram for a family.

### Module Two: Culture

- Topic 1. What is culture?
- Topic 2. Communication across cultures.
- Topic 3. Providing appropriate care in a multicultural society.
- Topic 4. Indigenous Australians and the importance of kinship.
- Topic 5. Closing the gap.
- Topic 6. Effective communication and Indigenous people.

Module one: Professional Nursing Practice in Paediatrics.  
Module two: Culture

### Week 2 - 12 Mar 2018

| Module/Topic                    | Chapter   | Events and Submissions/Topic |
|---------------------------------|---|------------------------------|
| Module Three: Health promotion. | <ul style="list-style-type: none"> <li>Topic 1. Apply knowledge of health promotion issues as they relate to infants, children and adolescents.</li> <li>Topic 2. Identify appropriate strategies to promote growth, development and safety of the neonate, infant, and child.</li> </ul> |                              |

### Week 3 - 19 Mar 2018

| Module/Topic   | Chapter  | Events and Submissions/Topic |
|--|--|------------------------------|
| Module Four: Infant development and attachment.<br>Module Five: Common illnesses in infancy. | <b>Module Four: Infant development and attachment</b><br>Topic 1. Demonstrate understanding of normal foetal and infant development.<br>Topic 2. Explore the effects of prenatal substance abuse on the foetus and infant.<br>Topic 3. Differentiate the stage of growth and development experienced by infants.<br>Topic 4. Discuss developmental theories relevant to infant development.<br><b>Module Five: Common illnesses in Infancy</b><br>Topic 1 Hyperbilirubinaemia (Jaundice)<br>Topic 2 Sepsis<br>Topic 3 Pyloric Stenosis<br>Topic 4 Intussusception<br>Topic 5 Bronchiolitis<br>Topic 6 Poor Growth (previously known as failure to thrive)<br>Topic 7 Congenital Anomalies<br>Activity : Reflection |                              |

### Week 4 - 26 Mar 2018

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
|--------------|---------|------------------------------|

Module Six: Toddler development.  
 Module Seven: Common illnesses in the toddler years.

**Module Six: Toddler Development**

Topic 1. Demonstrate understanding of normal toddler development.  
 Topic 2. Differentiate the stages of growth and development experienced by toddlers.  
 Topic 3. Discuss development theories relevant to toddler development.

**Module Seven: Common illnesses in the toddler years.**

Topic 1. Gastroenteritis  
 Topic 2. Ingestion  
 Topic 3. Urinary tract infection  
 Topic 4. Head injuries  
 Topic 5. Child abuse, neglect and non-accidental injuries  
 Topic 6. Submersions  
 Topic 7. Croup  
 Topic 8. Developmental delay

**Week 5 - 02 Apr 2018**

| Module/Topic   | Chapter   | Events and Submissions/Topic |
|--|---|------------------------------|
| Module Eight: Young child/ Pre-school age development.<br>Module Nine: Common illnesses in young children. | <p><b>Module 8</b><br/>           Topic 1. Discuss the concept of positive parenting.<br/>           Topic 2. Demonstrate understanding of normal preschool child development.<br/>           Topic 3. Differentiate the stages of growth and development experienced by preschool children.<br/>           Topic 4. Discuss development theories relevant to preschool child development.</p> <p><b>Module 9</b><br/>           Topic 1. Demonstrate understanding of common illnesses of the preschool aged child.<br/>           Topic 2. Worms and parasites<br/>           Topic 3. Alterations in the cognitive, sensory and/or communication abilities of the child<br/>           Topic 4. Reactive airways disease and asthma<br/>           Topic 5. Burn injuries<br/>           Topic 6. Genetic epilepsy</p> |                              |

**Vacation Week - 09 Apr 2018**

| Module/Topic              | Chapter | Events and Submissions/Topic |
|---------------------------|---------|------------------------------|
| Have a break or catch up. |         |                              |

**Week 6 - 16 Apr 2018**

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
|              |         |                              |

Module Ten: School aged child development.  
 Module Eleven: Understanding common illnesses of the school aged child.

**Module Ten: School Aged Child Development**

Topic 1. Demonstrate understanding of normal school aged child development.  
 Topic 2. Differentiate the stages of growth and development experienced by school aged children.  
 Topic 3. Discuss development theories relevant to school aged child development.

**Module Eleven: Understanding of common illnesses of the school aged child.**

- a) Therapeutic management of the child with a behavioural disorder
- b) Bedwetting
- c) Childhood cancer
- d) Diet and health
- e) Appendicitis

**Week 7 - 23 Apr 2018**

| Module/Topic                                   | Chapter  | Events and Submissions/Topic  |
|--|--|---|
| Module Twelve: Care of the hospitalised child. | <p><b>Module Twelve</b></p> <p>Topic 1. Display knowledge on the importance of developmentally appropriate care for the hospitalised child.</p> <p>Topic 2. Explore avenues to improve the care of children within the hospital setting.</p> <p>Topic 3. Evaluate pain assessment processes as they apply to the care of the child.</p> <p>Topic 4. Discuss the various techniques used to manage pain in children.</p> <p>Topic 5. Examine the issues surrounding the hospital discharge of children.</p> | <p>Assessment item one due: Monday 23rd April 1600hrs Case Study 40%</p> <p><b>Written Assessment - Case Study</b><br/>           Due: Week 7 Monday (23 Apr 2018) 4:00 pm AEST</p> |

**Week 8 - 30 Apr 2018**

| Module/Topic  | Chapter   | Events and Submissions/Topic |
|---|---|------------------------------|
| Module Thirteen : The Seriously ill infant, Child or Adolsecent | <p><b>Module Thirteen: The seriously ill paediatric patient</b></p> <p>Topic 1. Identify the structured approach to assessment of the seriously ill infant.</p> <p>Topic 2. Discuss the assessment of children and adolescents following a trauma.</p> <p>Topic 3. Display ability to care for children and adolescents who have experienced a musculo-skeletal trauma.</p> |                              |

**Week 9 - 07 May 2018**

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
|              |         |                              |



### Module Fourteen: Adolescent Development

Module Fourteen: Adolescent development.

Topic 1. Demonstrate understanding of normal adolescent development.  
Topic 2. Differentiate the stages of growth and development experienced by adolescents.  
Topic 3. Discuss development theories relevant to adolescent development.  
Topic 4. Discuss development theories relevant to adolescent development.

#### Week 10 - 14 May 2018

| Module/Topic  | Chapter  | Events and Submissions/Topic |
|---|--|------------------------------|
| Module Fifteen: Common Illnesses, Mental Health Issues and Health Promotion in Adolescence. | <b>Module Fifteen:</b><br>Topic 1. Demonstrate understanding of common illnesses in adolescence.<br>Topic 2. Describe the factors that influence adolescent health.<br>Topic 3. Identify community services available to assist pregnant teenagers.<br>Topic 4. Discuss adolescent risk taking behaviours as it relates to health and wellness.<br>Topic 5. Demonstrate understanding of mental health issues in adolescence.<br>Topic 6. Evaluate risk minimization strategies to reduce drug usage by the adolescent.<br>Topic 7. Explore mental health promotion strategies applicable to the adolescent.<br>Topic 8. Apply knowledge of youth suicide prevention strategies to nursing care of the adolescent. |                              |

#### Week 11 - 21 May 2018

| Module/Topic                                  | Chapter   | Events and Submissions/Topic |
|---|---|------------------------------|
| Module 16: Paediatric Medication Calculations | Module 16: Paediatric Medication Calculations<br>Topic 1. Undertake conversions of micrograms to milligrams and milligrams to grams.<br>Topic 2. Carry out conversions of millilitres to litres.<br>Topic 3. Correctly calculate medication dosages for paediatric patients.<br>Topic 4. Explore issues related to medication errors and administration of medications to children. |                              |

#### Week 12 - 28 May 2018

| Module/Topic  | Chapter | Events and Submissions/Topic  |
|---|---------|---|
| Complete Assessment Item 2: Develop Essay, Powerpoint and audio for powerpoint. |         | Assessment item two due: Monday 28th May 1600hrs Written assessment and presentation 60%.<br><br><b>Written Assessment and Presentation - Assessment 2</b> Due: Week 12 Monday (28 May 2018) 4:00 pm AEST |

#### Review/Exam Week - 04 Jun 2018

| Module/Topic | Chapter | Events and Submissions/Topic |
|--------------|---------|------------------------------|
|--------------|---------|------------------------------|

## Term Specific Information

Zoom sessions will be offered to students in this unit this term. Students are strongly recommended to try and attend.

## Assessment Tasks

### 1 Written Assessment - Case Study

#### Assessment Type

Written Assessment

#### Task Description

### **T1 2018 NURS13128 Nursing Care for children and their families**

### **Assessment 1: Written Assessment Item 1-- Case Study**

**Word limit: 2000 words**

**Weighting: 40% Due: Week 7, Monday 23rd April, 1600hrs**

Assessment item one addresses unit learning outcomes one, two, three and four.

1. Utilise evidence-based practice principles to compare the unique biopsychosocial stages of child development and the impact these have on children and their families.
2. Examine legal, ethical and socio-cultural trends and their effect upon the provision of safe collaborative nursing care to children and their families.
3. Discuss cultural awareness principles and family centred care as applied to the nursing care of children and families.
4. Evaluate health promotion strategies at a local, national and international level relevant to the health and wellness of children and their families.

#### **Instructions to students**

When addressing the assessment topic, it is expected that you will write in the third person, read widely around the topic and correctly reference your paper using the APA referencing style. Please note: referencing constitutes of 10% of your overall mark for this assessment. The Unit Study Guide and Unit Profile school should not be used as reference sources. Please ensure all assessable items are in the body of the paper, as any unnecessary appendix included will not attract extra marks.

A 2000-word limit has been set for this assignment. The assignment should be in essay format, utilising evidence based resources to support your discussion. The essay should include a cover page, contents page (if headings used), introduction, body of assignment, a conclusion and reference list. 10% leeway on either side of the word limit will be accepted. Word count will be measured from the first word of the introduction to last word of the conclusion. Not included in the word count are in text references (for example your reference in brackets), the contents page, reference list and appendix (if included).

#### **Submitting your Assignment through Turnitin**

Please submit your assessment into the course moodle site assessment 1 submission box.

Your document should contain your assessment item 1 inclusive of a reference list. This document should be saved with the following:

- your name
- student number and
- NURS13128 Assessment item one

**This case study is based around the inquest into the death of Hunter Campbell Marr, a 9 year old boy, who died at the Logan Hospital, Logan Queensland on the 6<sup>th</sup> January 2014 after suffering from a severe asthma attack.**

The coroner's complete report can be found by clicking on the following link however it is not necessary to read the entire report for this assignment. \*Please note that coroner's reports can be distressing to read and if you require any assistance please ensure you seek assistance from your unit coordinator who can refer you on to student counselling if required.

[http://www.courts.qld.gov.au/\\_data/assets/pdf\\_file/0005/370067/cif-marr-hc-20150508.pdf](http://www.courts.qld.gov.au/_data/assets/pdf_file/0005/370067/cif-marr-hc-20150508.pdf)

**This is an abbreviated story taken from the coroner's case above.**

Hunter Marr was born on 20 October 2004. His parents are Matthew and Michelle Marr. The Marr family lived at Ormeau, Queensland.

Hunter was diagnosed with asthma in August of 2010 after suffering from an episode of coughing and

wheezing. Hunter went on to have a number of exacerbations of asthma during the period 2010 – 2014. According to the report the attacks were sporadic occurring in 2011, 2012, at the end of 2013, and beginning of 2014. During this time Hunter and his parents were given multiple asthma action plans, numerous education sessions by a number of clinicians and Hunter's parents also had in their possession medication to relieve the symptoms of asthma which was reportedly used infrequently.

At the time of the inquest in 2014 Hunter's parents could not recall Hunter being diagnosed with Asthma in 2010. The Parents appeared to believe that Hunter was a seasonal asthmatic and had only suffered one severe episode of asthma in 2011. The report clearly states that Hunter's parents denied the diagnosis of asthma despite considerable evidence to the contrary.

Hunter's final admission to hospital was very early January 2014 where he was treated at the Mater Children's Hospital for another episode of asthma. Hunter was discharged home from hospital after being able to be stretched to 3-4 ventolin via an inhaler and spacer. It appeared as though Hunter had an action plan in place and the treating clinician's at the hospital appeared to believe the parents had been educated on the plan.

The report does detail significant differences in the perception of Hunter's wellbeing during the night prior to his day of discharge from both the parents and clinician's point of view. These differences explain why from a clinician's perspective why they felt he was ready for discharge. At the inquest the verbal testimony given by Mr and Mrs Marr indicated they were very concerned about Hunter being discharged but this was not clearly handed over or written in the medical notes. Testimony given by one of the nurses at the inquest does indicate she had some idea of the parents concern but again this was not handed over and it appeared as though the parents did not voice this prior to leaving on the day of discharge.

Hunter was discharged home on the afternoon of the 5<sup>th</sup> January. Mrs Marr reports administering Ventolin a number of times through the night but then called an ambulance on the morning of 6<sup>th</sup> January as the ventolin did not appear to be relieving Hunter's shortness of breath and coughing. A short time later Hunter became unconscious and Hunter's parents commenced CPR as guided by QAS telephone staff. QAS arrived at the family home and attempted to continue resuscitation efforts. The QAS team transported Hunter to Logan Hospital where resuscitation efforts continued without success. Hunter was pronounced at 10am at Logan Hospital.

#### **The three main issues identified by the coroner are as follows:**

Comment 1, page 41

Parents' lack of acceptance or understanding of the diagnosis and appropriate management of their child's illness, as understood by the treating clinicians, particularly in relation to a potentially life-threatening illness, must be flagged, documented, escalated and addressed as a matter of urgency.

Comment 2, page 41

An expressed or perceived reluctance or dissatisfaction about the discharge of a child by a parent, particularly in relation to a potentially life-threatening illness, must be flagged, documented, escalated and addressed as matter of urgency

Comment 3, page 41

Didactic education of patients and parents must be supplemented by active assessment of understanding, particularly in relation to a potentially life-threatening illness and clinical staff reminded that it is what patients/parents understand that is crucial, not what information has been provided in oral or written form.

Task Details/Description.

The following assignment requires you to take into consideration the three comments from the Coroner's report and apply those recommendations as you manage the care of a child with asthma.

You are a graduate RN working in a Paediatric ward in a regional hospital. You are commencing on an afternoon shift and receive a clinical handover. You have been allocated to care for Xavier, a 7 year old boy who was admitted to the ward with exacerbation of asthma. Xavier has been in hospital for two days and has been seen by the treating paediatric team that morning. Xavier is able to be discharged home once he has been able to stretch to 3-4/24 doses of Ventolin and both he and his parents have been educated on management of his illness. Xavier should be discharged home with appropriate medication and a copy of the asthma education plan.

**Prior to attempting the assignment you are required to watch the video on the moodle site entitled 'Caring for Xavier'.**

The assignment is broken up into four sections.

**1.** In the first part you are to consider the handover given by the nurse with regards to Xavier. You are to critique the handover provided, compared with evidence based best practice and the national safety standards, and consider how this handover could impact on the care of Xavier.

**2.** As reflected in the video, Xavier's mother verbalizes to the nurse that she is unsure of Xavier's diagnosis and also indicates she is not sure about taking Xavier home.

The second part of your assignment requires you explain and justify with supporting evidence from the literature what actions you would take as the paediatric nurse in response to Xavier's mother and Xavier. You are aware that family centred care and safe collaborative nursing care is crucial to enable good outcomes for patients and their families.

**3.** In the third part of your assignment you are to discuss the education you would provide to Xavier and his parent/s to ensure they understand the diagnosis and the management plan for discharge. Part of the education plan must include health promotion strategies that are appropriate given Xavier's age and diagnosis. It is also important to consider Xavier's developmental stage and engagement strategies that involve both Xavier and his Mum.

4. It is now late in the afternoon. The treating paediatric team have reviewed Xavier. They are satisfied that he is now having Ventolin 4<sup>th</sup> hourly and advises that he can be discharged. Dr James states that he does not need to see Xavier again and leaves the ward. You are aware that prior to any discharge of a child, it is policy to take a set of vital signs. As you are taking Xavier's vital signs his mother again states 'I am really worried about taking Xavier home, I don't feel safe with him'.

In this fourth and final part of the assignment you are to review the CEWT form provided and interpret the vital signs taken from Xavier. Based on the findings and the concern voiced by Xavier's Mother you should explain what actions should occur. Your discussion needs to consider your legal and ethical responsibilities in managing the care of Xavier.

### Assessment Due Date

Week 7 Monday (23 Apr 2018) 4:00 pm AEST

Please see moodle for complete instructions

### Return Date to Students

Week 10 Monday (14 May 2018)

To be returned via Moodle (Grademark)

### Weighting

40%

### Assessment Criteria

| HD 85-100%  | D 75-84%  | C 65-74%   | P 50-64%   | F <50%   |     |
|---|---|--|--|--|-----|
| Excellent, succinct introduction that introduces the topic and outlines the direction of the paper. Excellent, succinct conclusion that outlines the main points and brings the argument to a logical close. (5%)                             | Clear and appropriate introduction that introduces the topic and outlines the direction of the paper. The conclusion outlines the majority of the main points and brings the argument to a close.                                       | Appropriate introduction that introduces the topic and outlines the direction of the paper and a conclusion that attempts to summarise the paper.  | Introduction is apparent but consists only of a list of the contents of the paper. Topic not clearly introduced. Conclusion is apparent but incomplete.  | No recognisable introduction. The topic is not introduced and/or there is no direction offered in respect of the paper. No conclusion or very inadequate.  | /5  |
| Excellent presentation of assignment, double spaced with 12 point font. Title page, contents page, discussion and reference list included. Consistently accurate with spelling, grammar and sentence and paragraph structure. (5%)            | Well presented assignment, double spaced with 12-point font. Title page, contents page, discussion and reference list included with 1 -2 errors. 1 or 2 errors spelling, grammar and/or sentence and paragraph structure.               | Well presented assignment, double spaced with 12 point font. Title page, contents page, discussion and reference list included with 3 -4 errors. 3-4 consistent errors with spelling, grammar and/or sentence and paragraph structure.           | Well presented assignment, double spaced with 12 point font. Many errors or 1 -2 of the following not submitted Title page, contents page, discussion and reference list. 5 -6 consistent errors with spelling, grammar and/or sentence and paragraph structure. | Poorly presented assignment. Double spacing not used. 12 point font not used. Title page, contents page, discussion and references not included. Consistently poor spelling, grammar and/or sentence and paragraph structure. (> 5 errors).  | /5  |
| <b>Approach and Argument (80%)</b>  |   |  |  |  |     |
| <b>HD 85-100%</b>   | <b>D 75-84%</b>   | <b>C 65-74%</b>  | <b>P 50-64%</b>  | <b>F &lt;50%</b>   |     |
| Clearly and accurately assesses the clinical handover and provides thorough discussion related to the child in the case study, with strong reference to evidence based practice and national standards.(20%)                                  | Assesses most major aspects of the clinical handover and provides a discussion related to the child in the case study with reference to evidence based practice and national standards.   | Descriptive but disjointed assessment of most aspects of the clinical handover with links to the child in the case study. Attempts to reference evidence based practice and national standards.  | Assesses some aspects of the clinical handover with some linking to the child in the case study. Some reference to evidence based practice and national standards.   | Minimal assessment of the clinical handover with poor linking to the child in the case study. Little to no reference to evidence based practice and the national standards.  | /20 |
| Able to clearly articulate actions to support the family in the case study demonstrating clear understanding of family centred and collaborative nursing care within the discussion. Excellent supporting evidence from the literature. (20%) | Discusses actions to support the family in the case study demonstrating understanding of family centred and collaborative nursing care within the discussion. Supported by evidence from the literature.                                | Some actions discussed to support the family in the case study. Attempts to demonstrate understanding of family centred and collaborative nursing care within the discussion. Some of the discussion supported with evidence.                    | Limited discussion of actions to support the family in the case study. Demonstrates limited knowledge of family centred and collaborative nursing care within the discussion. Minimal links to evidence from the literature.                                     | Inadequate discussion or incorrect series of actions to support the family in the case study. Demonstrates poor understanding of family centred and collaborative nursing care within the discussion and little to no links to the evidence. | /20 |
| Demonstrates a comprehensive education plan inclusive of health promotion strategies that considers the developmental age of the child. Engagement strategies clearly relate to the child and family in the case study.                       | Demonstrates well developed education plan inclusive of health promotion strategies that considers the developmental age of the child. Engagement strategies relate to the child and family in the case study.                          | Demonstrates general knowledge of health promotion strategies relevant to the child in the case study. Attempt to provide engagement strategies that relate to the child and family in the case study.   | Demonstrates basic knowledge of health promotion strategies relevant to the child in the case study. Minimal attempt to provide engagement strategies that relate to the child and family in the case study.   | Lack of knowledge of health promotion strategies relevant to the child in the case study. Little to no attempt to provide engagement strategies that relate to the child and family in the case study.                                       | /20 |
| Accurately interprets CEWT form. Actions are prioritized appropriately with thorough consideration of the nurses legal and ethical responsibilities to the care of the child and family in the case study. Argument clear and logical. (20%)  | Able to interpret CEWT form with minor error. Actions are generally prioritized with consideration of the nurses legal and ethical responsibilities to the care of the child and family in the case study. Argument proceeds logically. | CEWT form interpreted with errors. Attempts to prioritise actions with some consideration of the nurses legal and ethical responsibilities to the care of the child and family in the case study. Argument for the most part proceeds logically. | CEWT form interpreted with multiple errors. Attempts to prioritise actions with limited consideration of the nurses legal and ethical responsibilities to the care of the child and family in the case study. Argument lacks cohesion.                           | CEWT form interpretation incorrect. Actions are no order of priority with no consideration of the nurses legal and ethical responsibilities to the care of the child and family in the case study. Argument does not address the topic.      | /20 |
| <b>HD 85-100%</b>   | <b>D 75-84%</b>   | <b>C 65-74%</b>  | <b>P 50-64%</b>  | <b>F &lt;50%</b>   |     |
| <b>Referencing (10%)</b>  |   |  |  |  |     |

|  |   |   |   |  |    |
|--|---|---|---|--|----|
| Consistently integrates up-to-date references to support and reflect all ideas and factual information. No direct quotes used. Referencing is consistent throughout with APA. Consistently accurate with intext referencing. (5%)  | Generally integrates up-to-date references to support and reflect ideas and factual information, with 1 or 2 exceptions. 1or 2 direct quotes used. Referencing is consistent throughout with APA. 1 or 2 consistent intext referencing errors identified.   | Frequently integrates up-to-date references to support and reflect ideas and factual information, with 3 or 4 exceptions.3or 4 direct quotes used. Referencing is consistent throughout with APA. 3 or 4 consistent intext referencing errors identified.   | Occasionally integrates up-to-date references to support and reflect ideas and factual information, with 5 or 6 exceptions. 5or 6 direct quotes used. Referencing is consistent throughout with APA. 3 or 4 inconsistent intext referencing errors identified.  | Fails to or infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas and factual information. >7 direct quotes used. Referencing is not consistent with APA. Many inaccuracies with intext referencing (>5).<br><br>A minimum of 10 references not used. The required number of peer reviewed journal articles not sourced. Relevant books and web sites not used. Reference list not in alphabetical order. APA referencing style not used. Course Study Guide, Course Profile or Moodle discussion used as reference sources. Many inaccuracies with reference list referencing style (>5). | /5 |
| A minimum of 20 references used including 10 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered clearly and with the correct detail. Accurate use of APA referencing style evident. (5%) | A minimum of 17 references used including 8 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered as per APA referencing style guide. 1 or 2 consistent referencing errors identified in the reference list. | A minimum of 14 references used including 6 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered as per APA referencing style guide. 3 or 4 consistent referencing errors identified in the reference list. | A minimum of 10 references used including 4 peer reviewed journal articles as well as relevant books and web sites. Reference list not in alphabetical order. References in reference list have been entered as per APA referencing style guide. 3 or 4 inconsistent referencing errors identified in the reference list. |  | /5 |

Student: Grade: Marker:

Overall Comments:

### Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

### Submission

Online

### Submission Instructions

Please see moodle for complete instructions

### Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Information Technology Competence
- Cross Cultural Competence
- Ethical practice

### Learning Outcomes Assessed

- Utilise evidence-based practice principles to compare the unique biopsychosocial stages of child development and the impact these have on children and their families
- Examine legal, ethical and socio-cultural trends and their effect upon the provision of safe collaborative nursing care to children and their families.
- Discuss cultural awareness principles and family centred care as applied to the nursing care of children and families.
- Evaluate health promotion strategies at a local, national and international level relevant to the health and wellness of children and their families.

## 2 Written Assessment and Presentation - Assessment 2

### Assessment Type

Presentation and Written Assessment

### Task Description

### **T1 2018 NURS13128 Nursing care for children and their families**

**Assessment 2: Written Assessment & Power Point Presentation – Adolescent Health**

**Word limit: 2000 words and slides for a 10 minute presentation with audio**

**Weighting: 60%**

**Due: Monday 28<sup>th</sup> May, Week 12, 1600hrs**

Assessment item two addresses course learning outcomes one, two, three and four.

- 1.Utilise evidence-based practice principles to compare the unique biopsychosocial stages of child development and the impact these have on children and their families.
- 2.Examine legal, ethical and socio-cultural trends and their effect upon the provision of safe collaborative nursing care to children and their families.

3. Discuss cultural awareness principles and family centred care as applied to the nursing care of children and families.
4. Evaluate health promotion strategies at a local, national and international level relevant to the health and wellness of children and their families.

### **Instructions to students**

When addressing the assessment topic, it is expected that you will write in the third person, read widely around the topic and correctly reference your paper using the APA referencing style. Please note: referencing constitutes 10% of your overall mark for this assessment. The Unit Study Guide, Unit Profile or handouts from on-campus clinical laboratories/residential school's should not be used as reference sources. Please ensure all assessable items are in the body of the paper, as any unnecessary appendix will not attract extra marks.

### **Assessment 2 Task details**

The purpose of this assessment/presentation is to encourage critical analysis and reflection on nursing practice that would be applied in a community paediatric setting. It is expected that you will utilise up to date, evidence based literature to inform your responses.

### **Scenario**

You are a graduate Registered Nurse on rotation in the final half of your graduate year. It is your second week in your current rotation your local Child and Family Community Health Clinic. You have learned that a number of factors increase the risk of poor outcomes in adolescence if they are not managed well. Two of these factors are listed below.

You are required to: **Conduct a ten minute verbal presentation on ONE of the topics below.**

- **Adolescent mental health**
- **Adolescent sexual health**

**\*The topics are deliberately broad so that you can provide an overview of the larger issue or focus on one particular area of interest - for example: depression and anxiety in adolescence or teenage pregnancy.**

When you are developing your powerpoint with audio please ensure you consider the audience that you would deliver your presentation to (this might include your colleagues or adolescents in school for example).

**Note: It is expected that you would need at least 7 - 10 slides for a ten-minute presentation. You should include and address the following:**

- Your chosen topic should identify the significance of the health problem in your local community and within Australia by using demographic data/statistics. Compare Australian statistics to world health data.
- Give a brief overview of how your chosen topic influences adolescent health both in their present and in their future health.
- Ensure that you review age groups as well as ethnic and cultural groups to establish who is most impacted by this issue.
- Address why the issue is so prevalent in this target group, providing evidence to justify your view point.
- From a nursing practice perspective communicate with the audience how you address the legal and ethical issues that arise when adolescents present to the clinic for support and advice with your chosen issue.
- Establish a health promotion plan that provides at least three family-centred, ethically and culturally appropriate interventions that could potentially prevent and improve outcomes for adolescents within your chosen topic. The plan should incorporate evidence-based rationales for the interventions.
- Consider developmental stages and needs of the adolescent group to ensure safe, therapeutic nursing care when forming your health promotion plan.
- When finalising your powerpoint presentation document the strategies utilised to demonstrate that you have considered your target audience.

### **Submitting your NURS13128 Assessment through Turnitin INSTRUCTIONS PLEASE READ CAREFULLY**

For this assignment you are required to develop a powerpoint presentation with audio. You will also need to submit the notes/essay you use for the audio component of your powerpoint. This will create two files that need to be submitted through the moodle site 'assessment 2 submission box'.

#### **File 1 should contain:**

**Your powerpoint presentation with written notes (in essay format) at the bottom of the slides, including a slide that details your reference list. You will convert the powerpoint and notes into a word document for submission.** (Instructions on converting your powerpoint with notes into a word document are detailed below).



The slide picture's/ diagrams/ information should link to the notes at the bottom of the slide; the notes are really your detailed, thorough explanation of the slide. Slides should only contain minimal information/words or pictures to demonstrate what you are saying in your notes.

## **OR**

You may choose to develop your power-point **and** an essay in a word document that clearly links with the power-point slides. For example, in the word document you could use headings such as Slide 1, followed by information that explains Slide 1, and so on.

You can then convert your powerpoint into handout notes (as instructed below) and copy and paste the essay into the document either at the end or underneath the word version of the slides.

### **TO CONVERT YOUR POWER-POINT INTO WORD HANDOUT FOR SUBMISSION:**

#### **Office 2010:**

1. Click on File.
2. Click on Save and Send.
3. Under file types, click on Create Handouts.
4. Under Create Handouts in Microsoft Word, click on Create Handouts.
5. The Send to Microsoft Office Word dialogue box appears.
6. This has several options as to how you would like your handouts to appear in Word. Choose one of them.
7. Click on OK, wait a short while, and there they are.

Office 2013 (and 2016 is the same)

1. Click on File.
2. Click on Export.
3. Click on Create handouts on the left
4. Click on Create Handouts on the right
5. This has several options as to how you would like your handouts to appear in Word. Choose one.
6. Click on OK, wait a short while, and there they are.

To add a title page or other blank pages to your document in Microsoft Word:

- Select "Insert" in top menu
- Select "Blank Page" in far right of drop down menu

#### **Reference List**

- Your reference list should be included in slides at the end of your speech so that your listeners are aware of the sources you have used and that your discussion is based on evidence.
- If you choose, you can also add in a reference list at the end of the document by again going to insert (top menu), and then choosing blank page.

This document should be saved with the following:

- your name
- student number and
- NURS13128 Assessment item 2

#### **File 2 should contain:**

Your Powerpoint with audio. This is your voice recording of the presentation.

To record audio:

In your powerpoint from Home go to the **Slide Show tab** at the top and then **Record Slide Show**.

#### **Guide to the audio:**

The audio component may take some practice and you can delete the audio and try again as many times as you need to be happy with your presentation. The notes or essay you have created form the basis of your audio however it is not necessary to read aloud the references you have used. You also may adjust some of the wording or language you use in the audio to better suit the audience you would like present to. You can state your preferred audience this at the beginning of the presentation.

This second file should also be saved with the following:

- your name
- student number and
- NURS13128 Assessment item 2

**Please note: The unit coordinator will provide a recorded zoom session for students on this assignment. This will help students with the details and technical components of creating audio and converting into word for submission.**

\*The 2016 version of powerpoint has some great new features over the 2010 version of powerpoint and if possible recommendations would be to use the 2016 version.

#### **Assessment Due Date**

Week 12 Monday (28 May 2018) 4:00 pm AEST

Please see moodle for complete instructions

#### **Return Date to Students**

Review/Exam Week Friday (8 June 2018)

To be returned via Moodle (Grademark)

#### **Weighting**

60%

#### **Assessment Criteria**

HD 85-100%

D 75-84%

C 65-74%

P 50-64%

F <50%

## Structure (10%)

Clear and succinct introduction that introduces the topic and outlines the direction of the discussion. Clear and succinct conclusion that outlines the main points and brings the argument to a logical close. (5%)

Clear and appropriate introduction that introduces the topic and outlines the direction of the discussion. Clear and appropriate conclusion that outlines the main points and brings the argument to a close.

Appropriate introduction that introduces the topic and outlines the direction of the discussion. Conclusion outlines most of the main points and brings some sense of closure.

Introduction is apparent but consists only of a list of the contents of the discussion. Topic not clearly introduced. Conclusion apparent and outlines some of the main points and endeavours to bring the argument to a close—there may be some incongruity.

No recognisable introduction. The topic is not introduced and/or there is no direction offered in respect of the discussion. Little recognisable conclusion. Little reference to the main points and does not offer a clear conclusion to the paper

Excellent presentation of assignment, double spaced with 12 point font. Title page, contents page, discussion and reference list included. Consistently accurate with spelling, grammar and sentence and paragraph structure (5%)

Well presented assignment, double spaced with 12-point font. Title page, contents page, discussion and reference list included with 1 -2 errors. 1 or 2 errors spelling, grammar and/or sentence and paragraph structure.

Well presented assignment, double spaced with 12 point font. Title page, contents page, discussion and reference list included with 3 -4 errors. 3-4 consistent errors with spelling, grammar and/or sentence and paragraph structure.

Well presented assignment, double spaced with 12 point font. Many errors or 1 -2 of the following not submitted. Title page, contents page, discussion and reference list. 5 -6 consistent errors with spelling, grammar and/or sentence and paragraph structure.

Poorly presented assignment. Double spacing not used. 12 point font not used. Title page, contents page, discussion and references not included. Consistently poor spelling, grammar and/or sentence and paragraph structure. (> 5 errors).

## Approach and Argument (60%)

Clearly demonstrates an understanding of the health effects of the chosen topic. Clearly describes how the target group was chosen and provides clear, accurate and up to date data to justify choosing this target group. Clearly and accurately assesses the chosen target group that includes analysis of their biopsychosocial development. (10%)

Demonstrates an understanding of the health effects of the chosen topic. Describes how the target group was chosen and provides accurate and up to date data to justify choosing this target group. Assesses most major aspects of the target group that includes discussion of their biopsychosocial development.

Minimal understanding of the health effects of the chosen topic demonstrated. States a chosen target group and provides accurate data to justify choosing this target group. Descriptive but disjointed assessment of most aspects of target group with consideration of their biopsychosocial development.

Limited understanding of the health effects of chosen topic demonstrated. States a chosen demographic target group and is able to provide evidence to justify choosing this target group. Assesses some aspects of the target group with limited consideration of their biopsychosocial development.

Limited to nil understanding of the health effects of chosen topic demonstrated. No clear demographic target group and does not provide evidence to justify choosing this target group. Minimal reference to the target group. No consideration given to biopsychosocial development.

Demonstrates detailed and in-depth knowledge of health promotion strategies relevant to the target group. Able to clearly prioritise health promotion strategies and develop a plan that has consistent recognition of the special needs of the chosen target group. Rationales for health promotion strategies detailed and clear (20%)

Demonstrates well developed knowledge of health promotion strategies relevant to the target group. Able to prioritise health promotion strategies and develop a plan that frequently recognises the special needs of the chosen target group. Rationales for health promotion strategies clear.

Demonstrates general knowledge of health promotion strategies relevant to the target group. Attempt made to prioritise health promotion strategies and develop a plan that generally recognises the special needs of the chosen target group. Attempt made to provide rationales for health promotion strategies.

Demonstrates basic knowledge of health promotion strategies relevant to the chosen target group. Develops a plan that occasionally recognises the special needs of the chosen target group. Health promotion strategies not prioritised. Minimal/limited rationales for health promotion strategies.

Lack of knowledge of health promotion strategies relevant to the target group. Develops a plan that infrequently recognises the special needs of the chosen target group. Health promotion strategies not prioritised. Rationales health promotion strategies not evident.

Demonstrates critical thinking, problem solving skills and consistent integration of knowledge in the health promotion plan for the demographic target group (10%)

Demonstrates problem solving skills and integration of knowledge in the health promotion plan for the demographic target group

General integration of knowledge in the health promotion plan for the target group. Many attempts to problem solve and critically think about target group are obvious.

Occasional integration of knowledge in the health promotion plan for the demographic target group. Few attempts to problem solve and critically think about target group.

Infrequent integration of knowledge in the health promotion plan for the chosen target group. Critical thinking and problem solving skills not evident.

Clearly and accurately applies knowledge of legal and/or ethical frameworks when developing the health promotion plan for your chosen target group. Argument clear and logical (10%)

Able to apply knowledge of legal and/or ethical frameworks when developing the health promotion plan for your chosen target group. Argument disjointed at times but for the main flows logically.

Attempt made to apply knowledge of legal and/or ethical frameworks when developing the health promotion plan for your chosen target group. Some logic in argument but flow is disjoint.

Minimal application of knowledge of legal and/or ethical frameworks when developing the health promotion plan for your chosen target group. Logical follow of argument not evident.

Limited or no application of legal and/or ethical frameworks relevant to your chosen target group when developing the health promotion plan. Logical follow of argument not evident.

Clearly and accurately assesses relevant cultural considerations of your chosen target group. Able to clearly demonstrate cultural awareness and the cultural appropriateness of strategies and interventions. Argument clear and logical (10%)

Able to assess relevant cultural considerations of your chosen target group. Able to demonstrate cultural awareness and the cultural appropriateness of strategies and interventions. Argument disjointed at times but for the main flows logically.

Attempt made to assess relevant cultural considerations of your chosen target group. Minimal demonstration of cultural awareness and the cultural appropriateness of strategies and interventions. Some logic in argument but flow is disjointed.

Minimal attempt made to assess relevant cultural considerations of your chosen target group. Limited demonstration of cultural awareness and the cultural appropriateness of strategies and interventions. Logical follow of argument not evident.

Limited or no attempt made to assess relevant cultural considerations of your chosen target group. Limited or no demonstration of cultural awareness and the cultural appropriateness of strategies and interventions. Logical follow of argument not evident.

## Powerpoint Pres (20%)

### HD 85 - 100%

Powerpoint presentation and powerpoint notes clearly and accurately demonstrates an understanding of the health effects of chosen issue, clearly describes how the target group was chosen and provides clear, accurate and up to date data to justify choosing this target group (including a clear and accurate assessment of cultural considerations in relation to the demographic target group). Powerpoint presentation and powerpoint notes demonstrate a detailed and in-depth knowledge of health promotion strategies and consistent integration of knowledge in the health promotion plan for the target group (15%).

### D 75-84%

Powerpoint presentation and powerpoint notes demonstrates an understanding of the health effects of chosen issue, describes how the target group was chosen and provides accurate and up to date data to justify choosing this target group (including an assessment of cultural considerations in relation to the demographic target group). Powerpoint presentation and powerpoint notes demonstrate a well-developed knowledge of health promotion strategies and integration of knowledge in the health promotion plan for the demographic target group.

### C 65-74%

Powerpoint presentation and powerpoint notes demonstrates minimal understanding of the health effects of chosen issue, states a chosen target group and provides accurate data to justify choosing this target group, (including basic cultural considerations in relation to the demographic target group). Powerpoint presentation and powerpoint notes demonstrate general knowledge of health promotion strategies and general integration of knowledge in the health promotion plan for the demographic target group.

### P 50-64%

Powerpoint presentation and powerpoint notes demonstrates limited understanding of the health effects of chosen issue, states a chose target group and is able to provide evidence to justify choosing this target group, (including minimal cultural considerations in relation to the demographic target group). Powerpoint presentation and powerpoint notes demonstrate basic knowledge of health promotion strategies and basic integration of knowledge in the health promotion plan for the demographic target group.

### F <50%

Powerpoint presentation and powerpoint notes demonstrates limited to nil understanding of the health effects of chosen issue, no clear target group and does not provide evidence to justify choosing this target group (including no cultural considerations in relation to the demographic target group). Powerpoint presentation and powerpoint notes demonstrate lack of knowledge of health promotion strategies and limited to nil integration of knowledge in the health promotion plan for the demographic target group.

The audience was clearly considered in developing the presentation. (5%)

The audience was considered in developing the presentation. (5%)

Some consideration given to the audience in developing the presentation (5%)

Minimal consideration given to the audience when developing the presentation. (5%)

No consideration given to the audience when developing the presentation. (5%)

## Referencing (10%)

Consistently integrates up-to-date references to support and reflect all ideas and factual information. No direct quotes used. Referencing is consistent throughout with APA. Consistently accurate with intext referencing. (5%)

Generally integrates up-to-date references to support and reflect ideas and factual information, with 1 or 2 exceptions. 1or 2 direct quotes used. Referencing is consistent throughout with APA. 1 or 2 consistent intext referencing errors identified.

Frequently integrates up-to- date references to support and reflect ideas and factual information, with 3 or 4 exceptions. 3or 4 direct quotes used. Referencing is consistent throughout with APA. 3 or 4 consistent intext referencing errors identified.

Occasionally integrates up-to-date references to support and reflect ideas and factual information, with 5 or 6 exceptions. 5or 6 direct quotes used. Referencing is consistent throughout with APA. 3 or 4 inconsistent intext referencing errors identified.

Fails to or infrequent attempts (>7 errors) to integrate up-to- date references to support and reflect ideas and factual information. >7 direct quotes used. Referencing is not consistent with APA. Many inaccuracies with intext referencing (>5).



A minimum of 20 references used including 10 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered clearly and with the correct detail. Accurate use of APA referencing style evident. (5%)

A minimum of 17 references used including 8 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered as per APA referencing style guide. 1 or 2 consistent referencing errors identified in the reference list.

A minimum of 14 references used including 6 peer reviewed journal articles as well as relevant books and web sites. Reference list in alphabetical order. References in reference list have been entered as per APA referencing style guide. 3 or 4 consistent referencing errors identified in the reference list.

A minimum of 10 references used including 4 peer reviewed journal articles as well as relevant books and web sites. Reference list not in alphabetical order. References in reference list have been entered as per APA referencing style guide. 3 or 4 inconsistent referencing errors identified in the reference list.

A minimum of 10 references not used. The required number of peer reviewed journal articles not sourced. Relevant books and web sites not used. Reference list not in alphabetical order. APA referencing style not used. Course Study Guide, Course Profile or Moodle discussion used as reference sources. Many inaccuracies with reference list referencing style (>5).

## Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

## Submission

Online

## Submission Instructions

Please see moodle for complete instructions

## Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Information Technology Competence
- Cross Cultural Competence
- Ethical practice

## Learning Outcomes Assessed

- Utilise evidence-based practice principles to compare the unique biopsychosocial stages of child development and the impact these have on children and their families
- Examine legal, ethical and socio-cultural trends and their effect upon the provision of safe collaborative nursing care to children and their families.
- Discuss cultural awareness principles and family centred care as applied to the nursing care of children and families.
- Evaluate health promotion strategies at a local, national and international level relevant to the health and wellness of children and their families.

## Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the [Student Academic Integrity Policy and Procedure](#). This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

### What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

### Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

### Where can I get assistance?

For academic advice and guidance, the [Academic Learning Centre \(ALC\)](#) can support you in becoming confident in completing assessments with integrity and of high standard.

### What can you do to act with integrity?



#### Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



#### Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



#### Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem