

Profile information current as at 19/05/2024 03:58 am

All details in this unit profile for NURS13128 have been officially approved by CQUniversity 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 <u>Assessment Policy and Procedure (Higher Education Coursework)</u>.

Offerings For Term 1 - 2019

Online

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 <u>University's Grades and Results Policy</u> 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

Not all links were working in the moodle site.

Recommendation

Ensure links provided on moodle site are checked repeatedly during term and fixed as needed.

Feedback from Student evaluations; Self reflection.

Feedback

Broad format, including assessment items, in the unit appeared to be well received by students and they commented they enjoyed the zoom lectures/sessions.

Recommendation

Unit coordinator will update and revise the unit as necessary but will continue with the broad format of the unit. The zoom sessions will be scheduled again in the next offering of the unit as they appear to be of value to both students and staff.

Feedback from Student evaluations; self reflection.

Feedback

Feedback from students was largely very positive. Students commented that the unit coordinator was available, helpful and provided timely responses to queries.

Recommendation

Continue to prioritise answering student queries, particularly around assessment due dates.

Feedback from Broader feedback.

Feedback

Industry paediatric staff reviewed the assessment items and all feedback received was positive.

Recommendation

Industry feedback valuable to unit coordinator when considering development of assessment items that are relevant to industry and in alignment with learning outcomes.

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 Assessment Tasks to Learning Outcomes Assessment Tasks									
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2 - Presentation and Written Assessment - 60%	2 - Presentation and Written Assessment - 60%	•	•	•	•	•	•		

Alignment of Learning Outcomes, Assessment and Graduate Attributes

Textbooks and Resources

Textbooks

There are no required textbooks.

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

For further information, see the Assessment Tasks.

Teaching Contacts

Lucy Rogers Unit Coordinator

l.rogers@cgu.edu.au

Schedule

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.

Module one: Professional Nursing Practice in Paediatrics.

Topic 3. Explore issues pertinent to the scope of paediatric nursing

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.

Week 2 - 18 Mar 2019

Module/Topic

Chapter

Events and Submissions/Topic

Module Two: Health Promotion

Module Two: Paediatric and Adolescent Health Promotion. Topic 1. Apply knowledge of health promotion issues as they relate to infants, children and adolescents. Topic 2. Identify appropriate strategies to promote growth, development and safety of the neonate, infant, child and adolescent.

Week 3 - 25 Mar 2019

Module/Topic Chapter **Events and Submissions/Topic**

Module Three: Paediatric Medication Calculations
Topic 1. Undertake conversion of micrograms to milligrams and milligrams to grams.
Topic 2. Carry out conversions of millilitres to litres.

Topic 3. Correctly calculate medication dosages for paediatric patients.

Topic 4. Explore issues related to medication errors and the administration of medications in children.

Module Three: Paediatric Medication

<u>Calculations</u> <u>Module Four: Cultural Considerations</u> when Caring for Paediatric Patients

Module Four: Cultural Considerations when Caring for Paediatric Patients

Topic 1: What is culture?
Topic 2: Communication across cultures.

Topic 3: Providing appropriate care in a multicultural society

Topic 4: First Nations People (Indigenous Australians) and the importance of kinship. Topic 5: Closing the gap.

Topic 6: Effective communication and First Nations (Indigenous) People.

Week 4 - 01 Apr 2019

Module/Topic **Events and Submissions/Topic**

Module Five: Infant development

Topic 1. Demonstrate an understanding of normal foetal and infant development.

Topic 2. Explore the effects of prenatal substance abuse on the foetus and infant. Topic 3. Differentiate the stage of growth and development experienced by infants.

Assessment 1 Due: Wednesday,

Assessment 1: Health Promotion

Due: Week 4 Wednesday (3 Apr 2019) 11:55 pm AEST

April 3rd at 23:55hrs

Topic 4. Discuss developmental theories relevant to infant development.

Module Six: Common Illnesses in Infancy

Module Five: Infant Development. Module Six: Common illnesses in Infancy.

Topic 1. Hyperbilirubinaemia (Jaundice).

Topic 2. Sepsis.

Topic 3. Pyloric Stenosis.

Topic 4. Intussusception.

Topic 5. Bronchiolitis.

Topic 6. Poor Growth (previously known as failure to thrive).

Topic 7. Congenital Anomalies.

Activity: Reflection

Week 5 - 08 Apr 2019

Module/Topic Chapter **Events and Submissions/Topic**

Module Seven: Care of the Hospitalised Child.

Topic 1. Display knowledge on the importance of developmentally appropriate care for the hospitalised child.

Topic 2. Explore avenues to improve the care of children within the hospital setting.

Topic 3. Evaluate pain assessment processes as they apply to the care of the child.

Topic 4. Discuss the various techniques used to manage pain in children.

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Topic 5. Examine the issues surrounding the hospital discharge of children.

Module Eight: The Seriously ill infant, Child or Adolescent

Topic 1. Identify the structured approach to the assessment of the seriously ill infant.

Topic 2. Discuss the assessment of children and adolescents following a trauma.

Topic 3. Display the ability to care for children and adolescents who have experienced musculoskeletal trauma.

Vacation Week - 15 Apr 2019

Module Seven: Care of the

Module Eight: The Seriously ill infant,

Hospitalised Child.

Child or Adolescent

Module/Topic

Chapter

Events and Submissions/Topic

Week 6 - 22 Apr 2019

Have a break or catch up.

Module/Topic

Chapter

Events and Submissions/Topic

Module Nine: Normal Toddler Development.

Topic 1. Demonstrate an 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 Nine: Normal Toddler Development.

Module Ten: Common illnesses in the Toddler Years

Module Ten: 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 7 - 29 Apr 2019

Module/Topic

Chapter

Events and Submissions/Topic

Module Eleven: Pre-School Child Development

Topic 1. Discuss the concept of positive parenting.

Topic 2. Demonstrate an understanding of normal preschool child development.

Topic 3. Differentiate the stages of growth and development experienced by preschool children.

Topic 4. Discuss development theories relevant to preschool child

Module Eleven: Pre-School Child Development Module Twelve: Common illnesses in Pre-School Years.

Module Twelve: Common illnesses in Pre-School Years.

Topic 1. Demonstrate an understanding of common illnesses of the preschool aged child.
Topic 2. Worms and parasites
Topic 3. Alterations in the cognitive, sensory and/or communication abilities of the child.
Topic 4. Reactive airways disease and asthma.

Topic 5. Burn injuries.
Topic 6. Genetic epilepsy

Week 8 - 06 May 2019

Module/Topic

Chapter

development.

Events and Submissions/Topic

Module Thirteen: School-aged child development.

Topic 1. Demonstrate an understanding of normal school-aged child development.

Topic 2. Differentiate the stages of growth and development experiences.

growth and development experienced by school-aged children.

Topic 3. Discuss development theories relevant to school-aged child development.

Module Thirteen: School-aged child development.

Module Fourteen: Understanding the common illnesses of the school-aged child.

Module Fourteen: Understanding the 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 9 - 13 May 2019

Module/Topic

Chapter

Events and Submissions/Topic

Module Fifteen: Adolescent development.	Module Fifteen: 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 - 20 May 2019		
Module/Topic	Chapter	Events and Submissions/Topic
Module Sixteen: Common Illnesses and Mental Health Issues in Adolescence.	Module Sixteen: Common Illnesses and Mental Health Issues in Adolescence. Topic 1. Demonstrate understanding of common illnesses in adolescence. Topic 2. Describe the factors that influence adolescent health. Topic 3. Identify community services available to assist pregnant teenagers. Topic 4. Discuss adolescent risk-taking behaviours as it relates to health and wellness. Topic 5. Demonstrate understanding of mental health issues in adolescence. Topic 6. Evaluate risk minimisation strategies to reduce drug usage by the adolescent. Topic 7. Explore mental health promotion strategies applicable to the adolescent. Topic 8. Apply knowledge of youth suicide prevention strategies to nursing care of the adolescent.	
Week 11 - 27 May 2019		
Module/Topic	Chapter	Assessment 2 Due: Wednesday, May 29th at 23:55hrs.
Preparation and finalisation of Assessment 2.		Assessment 2 - Immunisation Due: Week 11 Wednesday (29 May 2019) 11:55 pm AEST
Week 12 - 03 Jun 2019		
Module/Topic	Chapter	Events and Submissions/Topic
Time to review this Term and Breathe.		
Review/Exam Week - 10 Jun 2019		
Module/Topic	Chapter	Events and Submissions/Topic
Exam Week - 17 Jun 2019		
Module/Topic	Chapter	Events and Submissions/Topic

Module Fifteen: Adolescent

Term Specific Information

The NURS13128 Study Guide is in addition to the Unit Moodle page. Each week there will be a different focus as per the schedule.

ZOOM sessions will be held to discuss that week's subject area/s. These sessions will be recorded for students to rewatch/watch at a later date.

Assessment Tasks

1 Assessment 1: Health Promotion

Assessment Type

Written Assessment

Task Description

Assessment 1 addresses Unit outcomes 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 and correctly reference your paper using APA.

The Unit Study Guide, Unit Profile and Handouts from on-campus clinical labs/residential schools, should not be used as reference sources.

Please ensure all assessable items are in the body of the paper as if any appendix is included it will not attract extra marks.

Task Details

The purpose of this assessment is to encourage critical analysis, evidence-based research skills and application of knowledge when working with children and families.

The research required for this assessment can be applied to both tertiary and primary healthcare settings.

Assessment 1 Details.

Using your research skills, **choose 1 (one)** health promotion programme related to children and families, **from each of the following areas**;

- International
- National
- First Nations People

For **each** of the chosen health promotion areas **use the following as headings** to evaluate:

- The presentation of the health promotion programme to the target group.
- The role of the RN with regards to the health promotion programme.
- The accessibility of the health promotion programme to target group.

600 word +/- 10% in total for Assessment 2 (table and discussion).

Example of assessment layout

International - Give the name of the health promotion programme

The presentation of the health promotion programme to the target group.

☐ Write your information here.

The role of the RN with regards to the health promotion programme.

☐ Write your information here.

The accessibility of the health promotion programme to target group.

☐ Write your information here.

 $\hfill \square$ Repeat this for National and First Nations People.

Referencing

• There are no minimum number of references required.

- The word count is considered from the first word of the introduction to the last word of the conclusion.

 ☐ It excludes the cover page, abstract, contents page and reference list.
- $\hfill \square$ It includes in-text references and direct quotations.

Assessment Due Date

Week 4 Wednesday (3 Apr 2019) 11:55 pm AEST Submission is via Moodle - Turnitin.

Return Date to Students

Vacation Week Friday (19 Apr 2019)

Marked work, with comments, will be available via Moodle (Grademark) within 21 days of the submission date.

Weighting

40%

Minimum mark or grade

50%

Assessment Criteria

This assessment consists of 1 activity which must be completed at a **PASS** level or higher as per the NURS13128 marking guide.

A detailed marking guide is available and can be accessed on the NURS13128 Moodle page.

<u>Please note:</u> Only one revert to draft will be allowed, this enables students to resubmit before their final assessment submission.

IMPORTANT: Point 4.38 of the CQUniversity Assessment Policy and Procedure (Higher Education Coursework) states: "Graded units are marked on the basis of student academic performance in a unit against a range of numerical marks that equates to a particular grade. Graded units may also contain nongraded (pass/fail) assessment tasks within the unit's overall assessment structure."

	HD (100 - 85%)	D (84 - 75%)	C (74 - 65%)	P (64 - 50%)	F (<50%)	
Structure (5%)					Poorly presented assignment, Many	
Assessment presentation, inclusion of assessment requirements, grammar and structure (5%)	Excellent presentation of assignment. Cover page, discussion and reference list included. Consistently accurate with spelling, grammar and sentence and paragraph structure.	Well-presented assignment. Cover page, discussion and reference list included. 1 or 2 errors in spelling, grammar and/or sentence and paragraph structure.	Well-presented assignment. Cover page, discussion and reference list included. 3 or 4 errors in spelling, grammar and/or sentence and paragraph structure.	Well-presented assignment. Many errors or 1 -2 of the following not submitted. Cover page, discussion or reference list not included. 5 -6 consistent errors with spelling, grammar and/or sentence and paragraph structure.	rouny presented assignment, Many errors or 3+ of the following not submitted, Cover page, discussion or reference list not included. Consistently poor spelling, grammar and/or sentence and paragraph structure. (> 5 errors).	
Approach and Argument (70%)					Poorly completed choice and evaluation	
International Health Promotion - Presentation of the health promotion programme to target group (10%)	Excellent, well-documented choice and evaluation of the presentation of the chosen international health promotion programme, with no errors or omissions.	Accurate, well-documented choice and evaluation of the presentation of the chosen international health promotion programme, with 1-2 errors or omissions	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen international health promotion programme, with 1-2 errors or omissions	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen international health promotion programme, with 3+ errors or omissions	roony completed croice and evaluation of the presentation of the chosen international health promotion programme, with multiple errors or omissions. Little to no links to evidence from the ilteratournet discussion international to the control of	
International Health Promotion - The role of the RN with regards to the health promotion programme (10%)	Able to clearly articulate the role of the RN with regards to the chosen International health promotion programme. Excellent supporting evidence from the literature.	Discusses the role of the RN with regards to the chosen international health promotion programme. Supported by evidence from the literature.	Some discussion about the role of the RN with regards to the chosen International health promotion programme. Some of the discussion supported by evidence from the literature.	Limited discussion about the role of the RN with regards to the chosen International health promotion programme. Minimal links to evidence from the literature.		
International Health Promotion - The accessibility of the health promotion programme to target group (10%)	Excellent, well-documented evaluation of the accessibility of the target group and the chosen International health promotion programme, with no errors or omissions. Excellent supporting evidence from the literature.	Accurate, well-documented evaluation of the accessibility of the target group and the chosen International health promotion programme, with 1-2 errors or omissions. Supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen International health promotion programme, with 1-2 errors or omissions. Some of the discussion supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen International health promotion programme, with 3+ errors or omissions. Minimal links to evidence from the literature.		
	HD (100 - 85%)	D (84 - 75%)	C (74 - 65%)	P (64 - 50%)	F (<50%)	
National Health Promotion - Presentation of the health promotion programme to target group (10%)	Excellent, well-documented choice and evaluation of the presentation of the chosen National health promotion programme, with no errors or omissions. Excellent supporting evidence from the literature.	Accurate, well-documented choice and evaluation of the presentation of the chosen National health promotion programme, with 1-2 errors or omissions. Supported by evidence from the literature.	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen National health promotion programme, with 1-2 errors or omissions. Some of the discussion supported by evidence from the literature.	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen National health promotion programme, with 34-errors or omissions. Minimal links to evidence from the literature.	Poorly completed choice and evaluation of the presentation of the chosen National health promotion programme, with multiple errors or omissions. Little to no links to evidence from the literature.	
National Health Promotion - The role of the RN with regards to the health promotion programme (10%)	Able to clearly articulate the role of the RN with regards to the chosen National health promotion programme. Excellent supporting evidence from the literature. Excellent supporting evidence from the literature.	Discusses the role of the RN with regards to the chosen National health promotion programme. Supported by evidence from the literature.	Some discussion about the role of the RN with regards to the chosen National health promotion programme. Some of the discussion supported by evidence from the literature.	Limited discussion about the role of the RN with regards to the chosen National health promotion programme. Minimal links to evidence from the literature.	Inadequate or incorrect discussion regarding the role of the RN with regards to the chosen National health promotion programme. Little to no links to evidence from the literature.	
National Health Promotion - The accessibility of the health promotion programme to target group (10%)	Excellent, well-documented evaluation of the accessibility of the target group and the chosen National health promotion programme, with no errors or omissions. Excellent supporting evidence from the literature.	Accurate, well-documented evaluation of the accessibility of the target group and the chosen National health promotion programme, with 1-2 errors or omissions. Supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen National health promotion programme, with 1-2 errors or omissions. Some of the discussion supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen National health promotion programme, with 3+ errors or omissions. Minimal links to evidence from the literature.	Poorly completed evaluation of the accessibility of the target group and the chosen National health promotion programme, with multiple errors or omissions. Little to no links to evidence from the literature.	
First Nations Health Promotion - Presentation of the health promotion programme to target group (10%)	Excellent, well-documented choice and evaluation of the presentation of the chosen First Nations health promotion programme, with no errors or omissions. Excellent supporting evidence from the literature.	Accurate, well-documented choice and evaluation of the presentation of the chosen First Nations health promotion programme, with 1-2 errors or omissions. Supported by evidence from the literature.	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen First Nations health promotion programme, with 1-2 errors or omissions	Fairly accurate, well-documented choice and evaluation of the presentation of the chosen First Nations health promotion programme, with 3+ errors or omissions. Minimal links to evidence from the literature.	Poorly completed choice and evaluation of the presentation of the chosen First Nations health promotion programme, with multiple errors or omissions. Little to no links to evidence from the literature.	
First Nations Health Promotion - The role of the RN with regards to the health promotion programme (10%)	Able to clearly articulate the role of the RN with regards to the chosen First Nations health promotion programme. Excellent supporting evidence from the literature.	Discusses the role of the RN with regards to the chosen First Nations health promotion programme. Supported by evidence from the literature.	Some discussion about the role of the RN with regards to the chosen First Nations health promotion programme. Some of the discussion supported by evidence from the literature. Some of the discussion supported by evidence from the literature.	Limited discussion about the role of the RN with regards to the chosen First Nations health promotion programme. Minimal links to evidence from the literature.	Inadequate or incorrect discussion regarding the role of the RN with regards to the chosen First Nations health promotion programme. Little to no links to evidence from the literature.	
	HD (100 - 85%)	D (84 - 75%)	C (74 - 65%)	P (64 - 50%)	F (<50%)	
First Nations Health Promotion - The accessibility of the health promotion programme to target group (10%)	Excellent, well-documented evaluation of the accessibility of the target group and the chosen First Nations health promotion programme, with no errors or omissions. Excellent supporting evidence from the literature.	Accurate, well-documented evaluation of the accessibility of the target group and the chosen First Nations health promotion programme, with 1-2 errors or omissions. Supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen First Nations health promotion programme, with 1-2 errors or omissions. Some of the discussion supported by evidence from the literature.	Fairly accurate, well-documented evaluation of the accessibility of the target group and the chosen First Nations health promotion programme, with 3+ errors or omissions. Minimal links to evidence from the literature.	Poorly completed evaluation of the accessibility of the target group and the chosen First Nations health promotion programme, with multiple errors or omissions. Little to no links to evidence from the literature.	
Referencing (5%)						
Referencing (5%)	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.	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.	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.	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	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.	

Referencing Style

• American Psychological Association 6th Edition (APA 6th edition)

Submission

Online

Submission Instructions

Via Moodle Turnitin • Cover Sheet (provided). • Assessment.1 • Reference List. As 1 document only in Word or PDF format.

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.

Graduate Attributes

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

2 Assessment 2 - Immunisation

Assessment Type

Presentation and Written Assessment

Task Description

Assessment 2 addresses Unit outcomes on, 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 and correctly reference your paper using APA.

The Unit Study Guide, Unit Profile and Handouts from on-campus clinical labs/residential schools, should not be used as reference sources.

Please ensure all assessable items are in the body of the paper as if any appendix is included it will not attract extra marks.

The research required for this assessment can be applied to both tertiary and primary healthcare settings.

The purpose of this assessment is to encourage critical analysis, evidence-based research skills and application

of knowledge when working with children and families.

Task Details

1. Complete the following table with a rationale for and against undertaking the national immunisation schedule (a total of 5 responses for each argument).

Provide a reference for each of the 5 responses and identify if the reference is from a credible source.

Reasons for undertaking Immunisation Schedule	Reference & its Credibility	Reasons against /objection to Immunisation Schedule	Reference & its Credibility
1		1	
2		2	
3		3	
4		4	
5		5	

2. Discuss the role of the RN when discussing the immunisation schedule with parents, families and colleagues.

The following headings must be used:

- · Ethical and legal responsibilities.
- · Personal versus professional opinions regarding the uptake of immunisation.
- · Cultural additions to the immunisation schedule
- · The bio-psychosocial development of the child in relation to immunisation.
- · Access to evidence-based resources for immunisation information.

850 word +/- 10% in total for Assessment 2 (table and discussion).

Referencing

- There are no minimum number of references required.
- The word count is considered from the first word of the introduction to the last word of the conclusion.
- \square It excludes the cover page, abstract, contents page and reference list.
- \square It includes in-text references and direct quotations.

Assessment Due Date

Week 11 Wednesday (29 May 2019) 11:55 pm AEST

Submission is via Moodle - Turnitin.

Return Date to Students

Week 12 Friday (7 June 2019)

Marked work, with comments, will be available via Moodle (Grademark) within 21 days of the submission date.

Weighting

60%

Minimum mark or grade

50%

Assessment Criteria

This assessment consists of 1 activity which must be completed at a **PASS** level or higher as per the NURS13128 marking guide.

A detailed marking guide is available and can be accessed on the NURS13128 Moodle page.

Please note: Only one revert to draft will be allowed, this enables students to resubmit before their final assessment submission.

IMPORTANT: Point 4.38 of the CQUniversity Assessment Policy and Procedure (Higher Education Coursework) states: " Graded units are marked on the basis of student academic performance in a unit against a range of numerical marks that equates to a particular grade. Graded units may also contain nongraded (pass/fail) assessment tasks within the unit's overall assessment structure."

	HD (100 - 85%)	D (84 - 75%)	C (74 - 65%)	P (64 - 50%)	F (<50%)
Structure (5%)					
Assessment presentation, inclusion of assessment requirements, grammar and structure (5%)	Excellent presentation of assignment. Cover page, discussion and reference list included. Consistently accurate with spelling, grammar and sentence and paragraph structure.	Well-presented assignment. Cover page, discussion and reference list included. 1 or 2 errors in spelling, grammar and/or sentence and paragraph structure.		Well-presented assignment. Many errors or 1 - 2 of the following not submitted, Cover page, discussion or reference list not included. 5 - 6 consistent errors with spelling, grammar and/or sentence and paragraph structure.	Poorly presented assignment. Many errors or 3+ of the following not submitted, Cover page, discussion or reference list not included. Consistently poor spelling, grammar and/or sentence and paragraph structure. (> 5 errors).
Approach and Argument (70%)					
Completion of Immunisation for/against table (15%)	Excellent, well documented completion of the Immunisation for/against table with no errors or omissions	Accurate, well documented completion of the Immunisation for/against table with 1-2 errors or omissions	Fairly accurate, well documented completion of the Immunisation for/against table with 1-2 errors or omissions	Fairly accurate, well documented completion of the Immunisation for/against table with 3+ errors or omissions	Poorly completed documentation of the Immunisation for/against table with multiple errors or omissions
Role of the RN - Ethical and legal responsibilities when discussing immunisation. (15%)	Clearly and accurately identifies the role of the RN regarding ethical and legal responsibilities when discussing immunisation. Excellent supporting evidence from the literature.	Identifies the role of the RN regarding ethical and legal responsibilities when discussing immunisation. Supported with evidence from the literature.	Some identification of the role of the RN regarding ethical and legal responsibilities when discussing immunisation. Some discussion supported with evidence from the literature	Limited identification of the role of the RN regarding ethical and legal responsibilities when discussing immunisation. Minimal links to evidence from the literature.	Inadequate or no identification of the role of the RN regarding ethical and legal responsibilities when discussing immunisation. Little or no links to evidence from the literature
Role of the RN - Personal vs. professional opinions regarding the immunisation schedule (15%)	Able to clearly articulate the role of the RN when discussing personal vs. professional opinions regarding the immunisation schedule. Excellent supporting evidence from the literature.	Discusses the role of the RN when discussing personal vs. professional opinions regarding the immunisation schedule. Supported by evidence from the literature.	Some discussion about the role of the RN when discussing personal vs. professional opinions regarding the immunisation schedule. Some of the discussion supported by evidence from the literature.	Limited discussion about the role of the RN when discussing personal vs. professional opinions regarding the immunisation schedule. Minimal links to evidence from the literature.	Inadequate or incorrect discussion regarding the role of the RN when discussing personal vs. professional opinions regarding the immunisation schedule. Little to no links to evidence from the literature.
	HD (100 - 85%)	D (84 - 75%)	C (74 - 65%)	P (64 - 50%)	F (<50%)
Role of the RN - When discussing the cultural additions to the immunisation schedule (15%)	Able to clearly articulate the role of the RN when discussing cultural additions to the immunisation schedule, demonstrating a clear understanding of family centred and collaborative nursing care within the discussion. Excellent supporting evidence from the literature.	Discusses the role of the RN when discussing cultural additions to the immunisation schedule, demonstrating an understanding of family centred and collaborative nursing care within the discussion. Supported by evidence from the literature.	Some discussion about the role of the RN when discussing cultural additions to the immunisation schedule. Attempts to demonstrate an understanding of family centred and collaborative nursing care within the discussion. Some of the discussion supported with evidence	Limited discussion about the role of the RN when discussing cultural additions to the liminumisation schedule. Demonstrates limited knowledge of family centred and collaborative nursing care within the discussion. Minimal links to evidence from the literature.	immunisation schedule. Demonstrates a poor understanding
Role of the RN - When discussing the biopsychosocial development of the child in relation to immunisation (15%)	Able to clearly articulate the role of the RN when discussing the biopsychosocial development of the child in relation to immunisation. Excellent supporting evidence from the literature.	Discusses the role of the RN when discussing the biopsychosocial development of the child in relation to immunisation. Supported by evidence from the literature.	Some discussion regarding the role of the RN when discussing the biopsychosocial development of the child in relation to immunisation. Some of the discussion supported by evidence from the literature.	Limited discussion regarding the role of the RN when discussing the biopsychoscolal development of the child in relation to immunisation. Minimal links to evidence from the literature.	Inadequate or incorrect discussion regarding the role of the RN when discussing the biopsychosocial development of the child in relation to immunisation. Little to no links to evidence from the literature.
Reflection (20%)					
Role of the RN - When discussing evidence-based resources for immunisation information (15%)	Able to clearly articulate the role of the RN when discussing evidence-based resources for the immunisation schedule. Excellent supporting evidence from the literature.	Discusses the role of the RN when discussing evidence-based resources for the immunisation schedule. Supported by evidence from the literature.	Some discussion regarding the role of the RN when discussing evidence-based resources for the immunisation schedule. Some of the discussion supported by evidence from the literature.	Limited discussion regarding the role of the RN when discussing evidence-based resources for the immunisation schedule. Minimal links to evidence from the literature.	Inadequate or incorrect discussion regarding the role of the RN when discussing evidence-based resources for the immunisation schedule. Little to no links to evidence from the literature.
Referencing (5%)					
Referencing (5%)	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.	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.	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.	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	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.

Referencing Style

• American Psychological Association 6th Edition (APA 6th edition)

Submission

Online

Submission Instructions

Via Moodle Turnitin • Cover Sheet (provided). • Assessment.2 • Reference List. As 1 document only in Word or PDF format.

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
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- 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.

Graduate Attributes

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

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 <u>Academic Learning Centre (ALC)</u> 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