

Profile information current as at 06/05/2024 06:01 am

All details in this unit profile for NURS13134 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

The focus of this unit is on the lifespan approach to nursing management that supports promoting the health of the individual experiencing a long-term illness. It will provide you with theoretical knowledge that will complement Clinical Nursing Practice 4 . You will build on your critical thinking and clinical reasoning skills through the development of knowledge with regards to nursing interventions required to provide safe nursing care to individuals, families and carers in the sub-acute and community setting.

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 NURS12158 Clinical Nursing Practice 3 BIOH12008 Human Pathophysiology NURS12157 Concepts of Mental Health Nursing NURS12156 Clinical Nursing Practice 2 or NURS11156 Acute Nursing Management NURS12154 Pharmacology for Nursing Practice or NURS12151 Pharmacology for Nursing NURS11158 Evidence Informed Nursing Practice or NHLT12001 Evidence Informed Practice

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</u> <u>Procedure (Higher Education Coursework)</u>.

Offerings For Term 1 - 2020

- Bundaberg
- Online
- Rockhampton

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

 Written Assessment Weighting: 50%
Written Assessment Weighting: 50%

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 <u>CQUniversity Policy site</u>.

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 Feedback from Moodle Site.

Feedback

Separate forums for the assessment pieces and specific and focused Zoom sessions.

Recommendation

The separate Forums for the individual assessments and Zoom sessions with the focused aspect will be maintained.

Feedback from Feedback from Moodle site.

Feedback

Concerns with late returns of assessments.

Recommendation

The unit coordinator is reaching out for potential markers earlier to ensure more than enough markers for the student load.

Feedback from Feedback from Moodle site.

Feedback

Appreciation for the annotated bibliography as assessment 1 to reinforce 'Evidence of Best Practice'.

Recommendation

Assessment 1 will remain as an annotated bibliography with specific guidelines to explain the expected outcomes.

Feedback from Feedback from Moodle site.

Feedback

Using case study characters over 3-4 weeks to address different health concepts.

Recommendation

The character case studies will remain. They are useful to illustrate 'real life' situations for different health issues and link the concepts with wholistic patient care.

Unit Learning Outcomes

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

- 1. Consider legal and ethical frameworks and evidence based practice principles to explore the complexity of person centred nursing care across the lifespan in the sub-acute and community settings.
- 2. Discuss a lifespan approach to local, national and international chronic disease patterns and preventative measures.
- 3. Explore the safe use of technology to facilitate person centred nursing care across the lifespan within the subacute and community settings.
- 4. Appraise communication processes that enable continuity of care, person safety and quality within the sub-acute and community setting.
- Integrate cultural competence to develop person centred nursing interventions across the lifespan including discharge planning where relevant to the sub-acute and community setting.

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

Alignment of Learning Outcomes, Assessment and Graduate Attributes

N/A Level

Level

Intermediate Introductory Level

Graduate Level

Professional Advanced Level Level

Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes				
	1	2	3	4	5
1 - Written Assessment - 50%	•	•	•	•	•
2 - Written Assessment - 50%	•	•	•	•	•

Alignment of Graduate Attributes to Learning Outcomes

Graduate Attributes	Learning Outcomes				
	1	2	3	4	5
1 - Communication	•	•	•	•	•
2 - Problem Solving	•	•	•	•	•
3 - Critical Thinking	•	•	•	•	•
4 - Information Literacy		•	•	•	•
5 - Team Work				•	
6 - Information Technology Competence		•	•		
7 - Cross Cultural Competence	•	•	•	•	•
8 - Ethical practice	•	•	•	•	•
9 - Social Innovation					

10 - Aboriginal and Torres Strait Islander Cultures

Alignment of Assessment Tasks to Graduate Attributes

Assessment Tasks	Gra	duat	e Att	ribut	es					
	1	2	3	4	5	6	7	8	9	10
1 - Written Assessment - 50%	•	•	•	•	•	•	•	•		
2 - Written Assessment - 50%	•	•	•	•	•	•	•	•		

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: <u>American Psychological Association 6th Edition (APA 6th edition)</u> For further information, see the Assessment Tasks.

Teaching Contacts

Katrina Lane-Krebs Unit Coordinator k.lane-krebs@cqu.edu.au Justine Connor Unit Coordinator j.connor@cqu.edu.au

Schedule

Week 1 - The Way Forward - 09 N	1ar 2020	
Module/Topic	Chapter	Events and Submissions/Topic
The Way Forward	Resources available in Moodle.	It has been long argued that the Australian health care system requires revision and reorientation towards a more comprehensive primary health care approach. This is in response to increasing social and demographic factors: such as health system burdens due to chronic conditions and the ever- growing elderly population, as well as increasing healthcare costs (Parker and Keleher, 2008). Issues that compound this are the pressures to decrease hospital length of stay, admissions to hospital and increased focus on care homes and de- institutionalisation processes to take all cohorts of patients back to their homes to continue healthcare in the community. Government attention has become increasingly focused on developing the capacity in the prevention and management of chronic disease conditions in order to attempt to address some of these issues.
Week 2 - Meet Molly - 16 Mar 202	20	
Module/Topic	Chapter	Events and Submissions/Topic

Meet Molly	Resources available in Moodle.	Some of you will remember meeting Molly in Medical-Surgical Nursing when she was on the way home from her latest hospital visit. She was very happy with the care that her lovely 'CQU students' gave her.
Week 3 - Molly has been transferre	ed from TCP to home - 23 Mar 2020	
Module/Topic	Chapter	Events and Submissions/Topic
Molly has been transferred from TCP to home	Resources available in Moodle.	This week Molly is at home. She has been seen by the ACAT team and referred to TCP to be assessed for home support until her mobility is at a level that will ensure Molly is safe from injury or harm. Molly is concerned about how she will manage at home but is very independent and does not like asking for help. She is feeling a little low in mood and quite anxious. Her family are very supportive but they can only visit now and again due to work responsibilities. Molly is a retired nurse so feels that she should be able to do it all herself.
Week 4 - Molly is transferred to a l	Residential Rehabilitation Unit - 30	Mar 2020
Module/Topic	Chapter	Events and Submissions/Topic
Molly is transferred to a Residential Rehabilitation Unit	Resources available in Moodle.	This week Molly is being transferred into a residential rehabilitation unit after her recent episode of ill health. She was assessed for CHF and this was ruled out by the cardiologist. She had suffered another exacerbation of her COPD. This episode has impacted on her recovery and is her second exacerbation in 6 months.
Week 5 - Meet Barry - 06 Apr 2020		
Module/Topic	Chapter	Events and Submissions/Topic
Meet Barry	Resources available in Moodle.	This week we introduce Barry. Barry is a 65-year-old Kamilaroi man who is an Elder in his community. He is one of 9 children, grew up on the Thiri Thiri Mission and worked as a station hand, then station manager and is now retired. He is married and has 5 children. Barry suffers from type 2 diabetes for which he is insulin-dependent. He admits to not managing his diabetes as well as he should. He also suffers from some moderate arthritis which gives him some bother at times. Mostly in his hips, knees and back. Assessment 1 - Annotated Bibliography Due: Week 5 Wednesday (8 Apr 2020) 4:45 pm AEST
Vacation Wook - 12 Apr 2020		
Vacation Week - 13 Apr 2020	Chanter	Events and Submissions/Tonis
Module/Topic	Chapter	Events and Submissions/Topic

Take some time out for you. Self-care is very important too!

Week 6 - Barry has some health co	mplications secondary to his diabet	es - 20 Apr 2020
Module/Topic	Chapter	Events and Submissions/Topic
Barry has some health complications secondary to his diabetes	Resources available in Moodle.	This week Barry has been home for several months. His antibiotic treatment has ceased, his foot wound is clean and no longer infected but not healing well. Poorly managed diabetes comes with many significant complications and side effects.
Week 7 - Barry receives some bad	news regarding his health - 27 Apr 2	2020
Module/Topic	Chapter	Events and Submissions/Topic
Barry receives some bad news regarding his health	Resources available in Moodle.	This week Barry is doing well. He has been managing his diabetes as per his management plan very well and has seen a great improvement in his diabetic foot ulcer which is almost completely healed. He has been walking for exercise and has noticed it is exacerbating his arthritis. Assessment 1 to be returned to students this week.
Week 8 - Barry meets Pam from the	e Palliative Care Team - 04 May 202	0
Module/Topic	Chapter	Events and Submissions/Topic
Barry meets the Palliative Care Team	Resources available in Moodle.	This week Barry is no longer responding to chemotherapy. Barry and Barbara are expecting a visit from Pam, a registered nurse with the Palliative Care Team. Barry, Barbara and their family are quite anxious as to them, Palliative Care means Barry is close to death.
Week 9 - Meet Bobbi - 11 May 2020		
Module/Topic	Chapter	Events and Submissions/Topic
Meet Bobbi	Resources available in Moodle.	This week you meet Bobbi. Bobbi is a 22-year-old woman living with her 75- year-old father, Robert. Bobbi's mother, Betty, passed away a few months ago from metastatic bowel cancer. Bobbi is an only child and was born with Down syndrome, or trisomy 21. Bobbi has the mental age of around an 11-12-year-old. She suffers from asthma and is classified as obese. Now access the Study Guide to learn more about Bobbi. Bobbi has been admitted to the Emergency Department. She is visibly flushed and unwell although she is still chatty and willing to engage with the staff. Her father, Robert is more reserved and appears disengaged and reluctant to interact with either Bobbi or the staff. Bobbi has some blood taken and is asked for a mid-stream urine sample.
Week 10 - Bobbi's asthma is acting		
Module/Topic	Chapter	Events and Submissions/Topic

Week 11 - Bobbi moves into "Yes! I CAN! House" - 25 May 2020 Module/Topic Events and Submissions/Topic This week Bobbi is moving into "Yes, I CAN! House". Bobbi will first need to be appointed a guardian as her father Robert has relinquished care due to hi diagnosis of Alzheimer's and his move closer to his brother Gus. Gus is Robert's Power of Attorney and Enduring Guardian, based in NSW. Bobbi moves into "Yes, I CAN House" Resources available in Moodle. Assessment 2 - Nursing Care Plan and Written Discussion Due: Week	r
Bobbi moves into "Yes, I CAN House" Resources available in Moodle. Bobbi moves into "Yes, I CAN House" Resources available in Moodle.	
Bobbi moves into "Yes, I CAN House" Resources available in Moodle. CAN! House". Bobbi will first need to be appointed a guardian as her father Robert has relinquished care due to hi diagnosis of Alzheimer's and his move closer to his brother Gus. Gus is Robert's Power of Attorney and Enduring Guardian, based in NSW. Assessment 2 - Nursing Care Plan	
11 Monday (25 May 2020) 4:45 pm AEST	s
Week 12 - Review Week - 01 Jun 2020	
Module/Topic Chapter Events and Submissions/Topic	
Review Week Resources available in Moodle. This week of the study guide is to be completed in conjunction with the preceding 11 weeks of the study guide and the corresponding resources on the Moodle site for NURS13134 – Community Nursing Perspectives.	;
Review/Exam Week - 08 Jun 2020	
Module/Topic Chapter Events and Submissions/Topic	
Exam Week - 15 Jun 2020	
Module/Topic Chapter Events and Submissions/Topic	
Assessment 2 to be returned to students this week.	

Term Specific Information

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

- 1. Consider legal and ethical frameworks and evidence-based practice principles to explore the complexity of person-centred nursing care across the lifespan in the sub-acute and community settings.
- 2. Discuss a lifespan approach to local, national and international chronic disease patterns and preventative measures.
- 3. Explore the safe use of technology to facilitate person-centred nursing care across the lifespan within the subacute and community settings.
- 4. Appraise communication processes that enable continuity of care, person safety and quality within the sub-acute and community setting.
- 5. Integrate cultural competence to develop person-centred nursing interventions across the lifespan including discharge planning where relevant to the sub-acute and community setting.

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

1 Assessment 1 - Annotated Bibliography

Assessment Type

Written Assessment

Task Description

Word Count: 2400 words (+/- 10%)

12 citations and 200 words (+/- 10%) for each citation

NB: The word count is considered from the first word of the introduction to the last word of the conclusion. It includes intext references and direct quotations. It excludes the cover page, contents page, reference list and appendices (if applicable). For the purposes of this assessment, the reference for each article is not counted, only the annotation. Weight: 50%

Instructions:

For this assessment, you will be collecting and evaluating the research literature that you will be using to complete Assessment 2. Assessment 1 requires you to complete an annotated bibliography compiled of 12 journal articles. The research articles must be quality literature and follow the three R's: Recent (within 5 years), Reliable (is the journal peerreviewed?) and Relevant (does the article relate to the research topic?). This means keeping a Community Nursing focus.

Please take some time to read and understand the requirements of Assessment 2 to allow for the best use of your research time. This will be addressed on the Moodle site as well.

An annotated bibliography provides a brief overview of the available research on a topic. You are required to find and briefly summarise 12 research. There is an exemplar of an annotated bibliography on the Moodle site for clarification. When you write an annotated bibliography, you will need to consider:

I. Purposes

II. Format

III. Writing style

I. Purposes

The task of compiling an annotated bibliography will help the researcher think about the relevance and quality of the material on a topic. Does the information meet the requirements of the topic? Is the information from a reliable and academically respected source?

II. Format

As this assessment task is to evaluate the research in a particular area, the following five steps should be followed. This is considered the descriptive and evaluative method. The format should follow this order:

- 1. Citation details (set out in current APA Referencing Style)
- 2. A short statement that explains the main focus or purpose of the work
- 3. A short summary of the theory, research findings or argument (e.g. intended audience, subjects covered, major arguments supported, research methods, conclusions reached, special features)

4. Consideration of the usefulness and/or limitations of the research articles (e.g. reliability of the text, credibility of the author, poor features, left-out content, weaknesses in argument)

5. An evaluative comment concerning how the article is relevant to the research you are conducting to complete Assessment 2. (e.g. critical comment, critical reflection that describes the usefulness or relevance of the information for your writing task).

III. Writing style

An annotated bibliography is a piece of formal academic writing and follows the general rules for all academic writing:

- Arrange journal articles in alphabetical order of first author surname
- Write an annotation for each journal article in a single paragraph
- Write in full sentences using academic writing style
- Use transition words (e.g. furthermore, moreover, however, therefore ...)
- Be concise mention only significant details in your summary
- Do not repeat information (e.g. the title) that is already in your citation

• Do not cross-reference i.e. use any in-text references as you are only writing about a single text.

Please be aware, this assessment is not an essay and as such, there is no requirement for an introduction or conclusion. However, in one sentence before your first annotation please identify which case study from Assessment 2 you have chosen to research.

General Instructions

 \cdot Please include a cover sheet/title page as part of your assessment. Please use plain formatting and 12-point font. Include the following information:

- Student Name
- Student Number
- Unit code and name

- Name of assessment
- Unit coordinators names
- Due date
- Word count

 \cdot Include page numbers on your assessment.

 \cdot Do not write an introduction or a conclusion.

 \cdot Do write a single sentence at the beginning of your work to identify the case study you have selected from Assessment 2.

- \cdot Compile your annotations in alphabetical order of author surname.
- \cdot Write in complete sentences and to academic standards.

Assessment Checklist.

- Does my assessment have a plain cover sheet/title page with all required information?
- Do I have one sentence to begin my assessment which identifies which case study from Assessment 2 I have
- conducted research for?
- Have I included page numbers on my assessment?
- Are my annotations in alphabetical order?
- Have I referenced as per the current APA Referencing Guide?
- Have I written in complete sentences and to academic standards?
- Have I addressed all five steps as per the required format for each annotation?
- Do I have 12 annotations?
- Have I kept to the required word count, excluding the citation?
- Are my sources all journal articles?
- Are my sources recent, reliable and relevant?
- Are my sources relevant to Community Nursing?

Final points...

Please remember, if you have accessed all available information and you are unclear, seeking help/support early, saves a lot of stress and misunderstanding.

Assessment Due Date

Week 5 Wednesday (8 Apr 2020) 4:45 pm AEST

Return Date to Students

Week 7 Wednesday (29 Apr 2020)

Weighting

50%

Assessment Criteria

HD 85-100%	D 75-84%	C 65-74%	P 50-64%	F <50%	
Structure 10%					
Consistently accurate with spelling, grammar, use of punctuation. Excellent presentation, double- spaced with 12-point font. No evident errors. Organisation and structure are clear and concise.	Generally accurate (1-2 inaccuracies) with spelling, grammar, use of punctuation. Well- presented, double- spaced, with 12-point font. Organisation and structure are clear.	Occasional inaccuracies (3-4) with spelling, grammar, use of punctuation. Suitable presentation, double- spaced with 12-point font. Organisation and structure are appropriate.	Frequent inaccuracies (5-6) with spelling, grammar, use of punctuation. Adequate presentation double- spaced with 12-point font. Organisation and structure allow misinterpretation of the meaning of the content.	Many inaccuracies (>6) with spelling, grammar, use of punctuation. Poorly presented and/or double spacing not used and/or 12-point font not used. Organisation and structure detract from the meaning of the content/or is irrelevant.	/5

Uses all correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. Has adhered to word count requirements.	Uses most correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (1-2 inaccuracies). Has mostly adhered to the word count requirements (1-2 annotations incorrect count).	Occasionally uses correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (3-4 inaccuracies). Has occasionally adhered to word count requirements (3-4 annotations incorrect count).	Limited use of correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (5-6 inaccuracies). Limited adherence to word count requirements (5-6 annotations incorrect count).	Minimal/no use of correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (>6 inaccuracies). Little to no adherence to word count requirements (>6 annotations incorrect count).	/5
Annotated Bibliography 80%					
There is a highly developed appraisal and evaluation of all literature cited. Very clearly linked back to the community nursing perspective. Very clearly linked back to the research focus of assessment 2.	There is a well- developed appraisal and evaluation of most literature cited. Somewhat clearly linked back to the community nursing perspective. Somewhat clearly linked back to the research focus of assessment 2.	There is evident appraisal and evaluation of some literature cited. Some links back to the community nursing perspective. Some links back to the research focus of assessment 2.	There is limited appraisal and evaluation of literature cited. Not clearly linked back to the community nursing perspective. Not clearly linked back to the research focus of assessment 2.	There is minimal/no appraisal and evaluation of the cited literature evident. Not linked back to the community nursing perspective. Not clearly linked back to the research focus of assessment 2.	/40
Annotations are consistently formatted in the 5- step, descriptive/evaluation method.	Annotations are generally formatted in the 5-step, descriptive/evaluation method (1-2 inaccuracies).	Annotations are occasionally formatted in the 5- step, descriptive/evaluation method (3-4 inaccuracies).	Annotations are infrequently formatted in the 5- step, descriptive/evaluation method (5-6 inaccuracies).	Annotations are rarely/not formatted in the 5-step, descriptive/evaluation method (>6 inaccuracies).	/20
12 quality journal articles used. All articles are recent, relevant and reliable.	12 quality journal articles used. At least 11 journal articles are recent, relevant and reliable.	12 quality journal articles used. At least 10 journal articles are recent, relevant and reliable.	12 quality journal articles used. At least 9 articles are recent, relevant and reliable.	12 quality journal articles not used and /or >4 journal articles are not recent and/or relevant and/or reliable.	/20
Referencing 10%					
Citations are consistently presented as per APA Referencing Style Guide. No errors identified in the citations.	Citations are frequently presented as per APA Referencing Style Guide. Minimal errors identified in the citations (1-2 errors).	Citations are generally presented as per APA Referencing Style Guide. Some errors identified in the citations (3-5 errors).	Citations are infrequently presented as per APA Referencing Style Guide. Frequent errors identified in the citations (6-8 errors).	Citations are rarely/not presented as per APA Referencing Style Guide. Many errors identified in the citations (>8).	/10
				Final Mark:	/100

Referencing Style

<u>American Psychological Association 6th Edition (APA 6th edition)</u>

Submission

Online

Learning Outcomes Assessed

• Consider legal and ethical frameworks and evidence based practice principles to explore the complexity of person centred nursing care across the lifespan in the sub-acute and community settings.

- Discuss a lifespan approach to local, national and international chronic disease patterns and preventative measures.
- Explore the safe use of technology to facilitate person centred nursing care across the lifespan within the subacute and community settings.
- Appraise communication processes that enable continuity of care, person safety and quality within the sub-acute and community setting.
- Integrate cultural competence to develop person centred nursing interventions across the lifespan including discharge planning where relevant to the sub-acute and community setting.

Graduate Attributes

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

2 Assessment 2 - Nursing Care Plan and Written Discussion

Assessment Type

Written Assessment

Task Description

Word Count: Part A - Care Plan Template – 3 x A4 pages, 12-point font, provided - formatted as per exemplar – see instructions

Part B - Written Discussion - 1500 words +/- 10%

NB: The word count is considered from the first word of the introduction to the last word of the conclusion. It includes intext references and direct quotations. It excludes the cover page, contents page, reference list and appendices (if applicable). For the purposes of this assessment, the reference for each article is not counted, only the annotation. Weight: 50%

Instructions:

In Assessment 1, you conducted an Annotated Bibliography to evaluate journal articles to use as your supporting evidence for this Assessment.

The following information will guide your research for Assessment 1.

For this assessment, you are required to select ONE segment from Emily's lifespan to examine. Please clearly identify ONE of the following in your assessment:

- · Segment 1 Introducing Emily
- · Segment 2 Adolescent Emily
- · Segment 3A Adult Emily Transplant
- · Segment 3B Adult Emily End of life care

Your assessment has two parts.

Part A

You are required to complete the Nursing Care Plan Template for your chosen lifespan segment. You must address the following three topics in the Nursing diagnoses from a Community Nursing Perspective.

· Safe use of technology to facilitate person-centred nursing care

 \cdot Communication processes that enable continuity of care

 \cdot Considerations of cultural issues

Your plan of care must be written with consideration to legal and ethical frameworks.

Use the provided Template for Part A. Format the Template as per the exemplar. Single line spacing, 12-point font, dot points.

You are to use no more than one (1) page per Nursing Diagnosis.

You are not required to reference in Part A.

Part B

You are required to write a discussion to justify your Nursing Care Plan. Part B will utilise your research from Assessment 1. You may choose to conduct further research and use alternative journal articles to those from Assessment 1. You are required to use 12 journal articles.

The articles must be quality literature and follow the three R's. Recent (within 5 years), Reliable (is the journal peerreviewed?) and Relevant (does the article relate to the research topic?). Keep your writing relevant to Community Nursing and ensure it supports the three topics for your Nursing Care Plan.

Your assessment should be written in essay form, including an introduction, the body of your work and a conclusion. It

should address the three topics from the Nursing Care Plan.

Please keep in mind, you are writing to support your decisions of care as a Community Nurse. This includes considering the legal and ethical components of your choices as well.

You must reference as per the current APA Referencing Guide. Please include page numbers on in-text references. Your chosen life stage segment should be identified in your Introduction.

Segment 1 - Introducing Emily

This is Emily. She is a lively and outgoing, almost 3-year-old. She is confident and talkative. Her mother, Lenka, has brought her to your clinic today. Lenka is a political asylum seeker from Slovakia and has been in Australia for 3 years. She was pregnant with Emily when she left her own country. When Lenka is asked any questions about Emily's father, she becomes very guarded and gives very little information.

While Lenka speaks English very well, her medical history is quite sparse. She has told you that she thinks other members of her extended family might have had cystic fibrosis. When you question her further on this point, she states more than one cousin died quite young and had issues with their breathing.

Lenka states Emily had some "bowel issues" when she was born but cannot give you any further information other than Emily's bowel motions are usually frequent, loose and very smelly. Lenka also states Emily had many tests after she was born, and then she was told Emily was diagnosed with cystic fibrosis. She has a large appetite but after weighing and measuring Emily, you note that she is on the lower end of the weight/height for age scale.

When she was about 6 months of age, she became ill and Lenka tells you she was producing lots of phlegm and was in hospital for some time.

Emily takes several medications but Lenka did not bring them with her, nor does she remember the names.

Emily has come to the clinic today for review post her last hospitalisation and for parent support and education.

Segment 2 - Adolescent Emily

Emily is 15 years old and in year 10 at high school. Emily has been diagnosed with pancreatic insufficiency but does not suffer from cystic fibrosis-related diabetes mellitus. She has been hospitalised 5 times in the last 10 years for pulmonary infections. She lives with her mother, Lenka. She is a high achieving student and is motivated to study and maintain her high grades. She attends full days at school, after school music and maintains her medical regime. She has missed 6 days of school in the last year due to cystic fibrosis.

Her daily routine includes waking at 5.30am to allow time for her physical therapy and medications. After commencing with bronchodilators and a mucolytic agent, she spends at least 45 minutes in a 'vest'. This is an electronically driven percussion device. (For further information on the vest, see the YouTube link on the Moodle site). This is usually interrupted by coughing episodes, which can be prolonged and tiring. Emily then continues with her breakfast and the multitude of medications she must take. These include prophylactic antibiotics, NSAID, anti-ulcer and antacid agents, antihistamine agent, pancreatic enzymes and vitamins. Before leaving for school, she takes another bronchodilator via a nebuliser and an intranasal corticosteroid. She takes more medications with her lunch at school including an NSAID and pancreatic enzymes.

When she returns home from school, her mother performs manual physical therapy with postural drainage. This comes with the coughing episodes and can take over 45 minutes to an hour.

With her evening meal, Emily takes more medications including NSAID, antibiotics and pancreatic enzymes. She then takes another bronchodilator nebulizer and dons her vest for another 45 minutes before retiring to bed after 10.30pm. Emily and her mother Lenka have to come to your clinic for ongoing support.

Emily states the most bothersome symptom to her is the relentless coughing and shortness of breath, especially first thing in the morning. She states she does not mind the chest physiotherapy even though it does take a significant amount of time through the day.

Emily tells you that her medical regimen is bothersome with the number of oral and inhalation medications. She states she tries to be consistent with taking her medication but sometimes 'forgets". Especially at school.

Emily tells you that her team have started to discuss transition to adult health care for her cystic fibrosis management. This makes Emily and Lenka quite distressed as they have had a long term and trusting relationship with their team.

Segment 3 - Adult Emily (This Segment has two parts, you must choose ONE only.)

Emily is 27 years old. She is engaged to Matt and they have been a couple since high school. They have no children, but Emily has an assistance dog in the form of Ollie, a well-trained standard poodle. Emily's mother passed away a few years ago because of a motor vehicle accident. Emily has no other family in Australia. She has recently had to resign her position as a teacher as the demands of her health, interventions and management have become too much. Emily's health has deteriorated to the point her health team have told her she needs to be placed on the transplant list for a lung transplant.

Part A - OR -

Emily states she is unsure of how she feels about this. However, she has agreed, and a pair of donor lungs become available.

(For this segment/part you may choose to consider factors from pre and/or post-operative for Emily.)

- OR - Part B

While waiting for her new lungs, Emily's health has deteriorated to such an extent that she is no longer fit for surgery. Emily has stated that she is tired and no longer wishes to fight. She tells you she just wants rest. After discussion with Emily and her team, it is agreed that she should be for end of life care and is transferred to the Palliative Care Team. (For this segment/part you may choose to consider factors from across the end of life care spectrum.)

General Instructions

 \cdot Please include a cover sheet/title page as part of your assessment. Please use plain formatting and 12-point font. Include the following information:

- Student Name
- Student Number
- Unit code and name
- Name of assessment
- Unit coordinators names
- Due date
- Word count
- \cdot Include page numbers on your assessment.
- \cdot Put the Nursing Care Plan following the cover sheet/title page.
- \cdot Part A should follow the formatting as per the exemplar and use dot points.
- Part B is to be written in complete sentences and to academic standards.

• The ONE chosen segment from Emily's lifespan should be clearly identified in the introduction of Part B. Please clearly identify ONE of the following in your assessment:

- Segment 1 Introducing Emily
- Segment 2 Adolescent Emily
- Segment 3A Adult Emily Transplant
- Segment 3B Adult Emily End of life care

· Referencing, both in-text and Reference list should be as per the APA Referencing Guide.

Assessment Checklist.

- Does my assessment have a plain cover sheet/title page with all required information?
- Have I included page numbers on my assessment?
- Have I positioned the Nursing Care Plan after the cover sheet/title page?
- Have I formatted Part A as per the exemplar?
- Have I identified the life stage segment I have chosen in the introduction in Part B?
- Have I written in complete sentences and to academic standards in Part B?
- Have I kept to the required word count or page usage?
- Have I referenced as per the current APA Referencing Guide, including page number on in-text references?
- Do I have 12 references?
- Are my sources all journal articles?
- Are my sources recent, reliable and relevant?
- Are my sources relevant to Community Nursing?
- Have I addressed the required three (3) points for Part A?
- Have I considered legal and ethical frameworks?

Final points...

Please remember, if you have accessed all available information and you are unclear, seeking help/support early, saves a lot of stress and misunderstanding.

Assessment Due Date

Week 11 Monday (25 May 2020) 4:45 pm AEST

Return Date to Students

Exam Week Monday (15 June 2020)

Weighting

50%

Assessment Criteria

HD 85-100%	D 75-84%	C 65-74%	P 50-64%	F <50%	
Structure 10%					

Consistently accurate with spelling, grammar, use of punctuation. Excellent presentation, double- spaced with 12-point font (where required). No evident errors. Organisation and structure are clear and concise.	Generally accurate (1-2 inaccuracies) with spelling, grammar, use of punctuation. Well- presented, double- spaced, with 12- point font (where required). Organisation and structure are clear.	Occasional inaccuracies (3-4) with spelling, grammar, use of punctuation. Suitable presentation, double- spaced with 12-point font (where required). Organisation and structure are appropriate.	Frequent inaccuracies (5-6) with spelling, grammar, use of punctuation. Adequate presentation double- spaced with 12-point font (where required). Organisation and structure allow misinterpretation of the meaning of the content.	Many inaccuracies (>6) with spelling, grammar, use of punctuation. Poorly presented and/or double spacing not used and/or 12-point font not used. Organisation and structure detract from the meaning of the content/or are irrelevant.	/5
Uses all correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. Has adhered to word count/page usage requirements.	page with correct details, identification	Occasionally uses correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (3-4 inaccuracies). Has adhered to word count and 1diagnoses page usage requirements as described in the Assessments Requirements document.	Limited use of correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (5-6 inaccuracies). Has adhered to word count. No diagnoses page usage requirements met as per the Assessments Requirements document.	Minimal/no use of correct components of assessment formatting as described in the Assessments Requirements document. e.g. cover page with correct details, identification sentence, page numbers. (>6 inaccuracies). Little to no adherence to word count or diagnoses page usage requirements as per the Assessments Requirements document.	/5
Nursing Care Plan and Written Discussion 80%					
Provides a consistently 'critically thought out' and succinct nursing care plan that comprehensively addresses all three (3) topics as per the Assessments Requirements document.	Provides a frequently 'critically thought out' and succinct nursing care plan that frequently addresses all three (3) topics as per the Assessments Requirements document.	Provides a generally 'critically thought out' nursing care plan that generally addresses all three (3) topics as per the Assessments Requirements document.	Occasionally provides a 'critically thought out' nursing care plan that occasionally addresses all three (3) topics as per the Assessments Requirements document.	Minimal/no 'critically thought out' nursing care plan that rarely/does not address, all three (3) topics as per the Assessments Requirements document.	/25
Consistently provides a succinct and convincing rationale for each Nursing Care Plan topic.	Frequently provides a succinct and convincing rationale for each Nursing Care Plan topic.	Generally, provides a succinct and/or convincing rationale for each Nursing Care Plan topic.	Occasionally provides a succinct and/or convincing rationale for each/most Nursing Care Plan topic.	Rarely/does not provide a succinct and/or convincing rationale for each/any Nursing Care Plan topic.	/25
Very clearly linked back to the community nursing perspective with very clear consideration to legal and ethical frameworks evident.	Somewhat clearly linked back to the community nursing perspective with somewhat clear consideration to legal and ethical frameworks evident.	Some links back to the community nursing perspective with some consideration to legal and ethical frameworks evident.	Not clearly linked back to the community nursing perspective with limited consideration to legal and ethical frameworks evident.	Not linked back to the community nursing perspective and/or minimal or missing consideration to legal and ethical frameworks evident.	/20

12 quality journal articles used. All articles are recent, relevant and reliable.	12 quality journal articles used. At least 11 journal articles are recent, relevant and reliable.	12 quality journal articles used. At least 10 journal articles are recent, relevant and reliable.	12 quality journal articles used. At least 9 articles are recent, relevant and reliable.	12 quality journal articles not used and /or >4 journal articles are not recent and/or relevant and/or reliable.	/10
Referencing 10%					
Reference list is consistently presented as per APA Referencing Style Guide. No errors identified. In- text referencing is consistently presented as per the APA Referencing Style Guide. Page numbers consistently included as per the Assessments Requirements document.	Reference list is frequently presented as per APA Referencing Style Guide. Minimal errors identified in the reference list (1-2 errors). In-text referencing is frequently presented as per the APA Referencing Style Guide. Page numbers frequently included as per the Assessments Requirements document (1-2 errors).	Reference list is generally presented as per APA Referencing Style Guide. Some errors identified in the reference list (3-5 errors). In-text referencing is generally presented as per the APA Referencing Style Guide. Page numbers generally included as per the Assessments Requirements document (3-5 errors).	Reference list is infrequently presented as per APA Referencing Style Guide. Frequent errors identified in the reference list (6-8 errors). In-text referencing is infrequently presented as per the APA Referencing Style Guide. Page numbers infrequently included as per the Assessments Requirements document (6-8 errors).	Reference list is rarely/not presented as per APA Referencing Style Guide. Many errors identified in the reference list (>8). In-text referencing is rarely/not presented as per the APA Referencing Style Guide. Page numbers rarely/not included as per the Assessments Requirements document (>8).	/10
				Final Mark:	/100

Referencing Style

<u>American Psychological Association 6th Edition (APA 6th edition)</u>

Submission

Online

Learning Outcomes Assessed

- Consider legal and ethical frameworks and evidence based practice principles to explore the complexity of person centred nursing care across the lifespan in the sub-acute and community settings.
- Discuss a lifespan approach to local, national and international chronic disease patterns and preventative measures.
- Explore the safe use of technology to facilitate person centred nursing care across the lifespan within the subacute and community settings.
- Appraise communication processes that enable continuity of care, person safety and quality within the sub-acute and community setting.
- Integrate cultural competence to develop person centred nursing interventions across the lifespan including discharge planning where relevant to the sub-acute and community setting.

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?





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