



# NURS20162 Clinical Nurse Practice

## Term 2 - 2019

Profile information current as at 29/04/2024 10:41 pm

All details in this unit profile for NURS20162 have been officially approved by CQU University and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

### General Information

#### Overview

This unit will provide you with advanced knowledge and skills in nursing assessment and care planning. You will learn how to apply a clinical reasoning process and an Aboriginal and Torres Strait Islander health assessment model in order to prioritise and perform holistic nursing care for individuals, families and groups. You will critically examine common risk screening tools and clinical pathways used in practice, to organise and perform safe and effective nursing care. You will evaluate early warning systems and health assessment instruments through evidence-based research and by analysing practice and policy documents. You will consider best practice implications for medication administration, wound care and contemporary nursing psychomotor skills. This unit incorporates a five-day residential school and 160 hours of work-integrated learning which you will undertake after week 12. This will allow you to demonstrate responsible nursing practice under the supervision of a Registered Nurse.

#### Details

Career Level: *Postgraduate*

Unit Level: *Level 8*

Credit Points: *12*

Student Contribution Band: *7*

Fraction of Full-Time Student Load: *0.25*

#### Pre-requisites or Co-requisites

Co-requisites - NURS20161 and NURS20160 Students must be enrolled in CH79 Graduate Certificate in Nursing (Re-Entry)

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

#### Offerings For Term 2 - 2019

- Mixed Mode

#### 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).

#### Residential Schools

This unit has a Compulsory Residential School for distance mode students and the details are: Click here to see your [Residential School Timetable](#).

#### 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 12-credit Postgraduate unit at CQUniversity requires an overall time commitment of an average of 25 hours of study per week, making a total of 300 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: Pass/Fail

#### 2. **Online Test**

Weighting: Pass/Fail

#### 3. **On-campus Activity**

Weighting: Pass/Fail

#### 4. **Professional Practice Placement**

Weighting: Pass/Fail

### Assessment Grading

This is a pass/fail (non-graded) unit. To pass the unit, you must pass all of the individual assessment tasks shown in the table above.

## 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 Unit Coordinator

##### **Feedback**

The unit coordinator found it difficult to offer the support necessary (accreditation requirement) to students while on clinical placements.

##### **Recommendation**

A casual staff member is appointed at 5hrs/week to monitor and respond to students and preceptors during clinical placement.

## Unit Learning Outcomes

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

1. Construct and adapt an evidence informed and culturally safe nursing care plan based on patient assessment data with consideration of Aboriginal and Torres Strait Islander peoples and other culturally or linguistically diverse backgrounds
2. Communicate with patients, families and healthcare teams, adhering to legal and professional standards
3. Evaluate medications used in Australia and their uses in different client groups
4. Prioritise and plan the safe administration of medications to a variety of patients
5. Apply the Nursing and Midwifery Board of Australia's Registered Nurse Standards for Practice in the safe and effective care of individuals, families and the community whilst in the industry based learning context.

Standard 1: Thinks critically and analyses nursing practice

- 1.1 accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality practice
- 1.2 develops practice through reflection on experiences, knowledge, actions, feelings and beliefs to identify how these shape practice
- 1.3 respects all cultures and experiences, which includes responding to the role of family and community that underpin the health of Aboriginal and Torres Strait Islander peoples and people of other cultures
- 1.4 complies with legislation, regulations, policies, guidelines and other standards or requirements relevant to the context of practice when making decisions
- 1.5 uses ethical frameworks when making decisions
- 1.6 maintains accurate, comprehensive and timely documentation of assessments, planning, decision-making, actions and evaluations, and
- 1.7 contributes to quality improvement and relevant research.

Standard 2: Engages in therapeutic and professional relationships

- 2.1 establishes, sustains and concludes relationships in a way that differentiates the boundaries between professional and personal relationships
- 2.2 communicates effectively, and is respectful of a person's dignity, culture, values, beliefs and rights
- 2.3 recognises that people are the experts in the experience of their life
- 2.4 provides support and directs people to resources to optimise health-related decisions
- 2.5 advocates on behalf of people in a manner that respects the person's autonomy and legal capacity
- 2.6 uses delegation, supervision, coordination, consultation and referrals in professional relationships to achieve improved health outcomes
- 2.7 actively fosters a culture of safety and learning that includes engaging with health professionals and others, to share knowledge and practice that supports person-centred care
- 2.8 participates in and/or leads collaborative practice, and
- 2.9 reports notifiable conduct of health professionals, health workers and others.

Standard 3: Maintains the capability for practice

- 3.1 considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice
- 3.2 provides the information and education required to enhance people's control over health
- 3.3 uses a lifelong learning approach for continuing professional development of self and others
- 3.4 accepts accountability for decisions, actions, behaviours and responsibilities inherent in their role, and for the actions of others to whom they have delegated responsibilities

3.5 seeks and responds to practice review and feedback

3.6 actively engages with the profession, and

3.7 identifies and promotes the integral role of nursing practice and the profession in influencing better health outcomes for people.

Standard 4: Comprehensively conducts assessments

4.1 conducts assessments that are holistic as well as culturally appropriate

4.2 uses a range of assessment techniques to systematically collect relevant and accurate information and data to inform practice

4.3 works in partnership to determine factors that affect, or potentially affect, the health and wellbeing of people and populations to determine priorities for action and/ or for referral, and

4.4 assesses the resources available to inform planning.

Standard 5: Develops a plan for nursing practice

5.1 uses assessment data and best available evidence to develop a plan

5.2 collaboratively constructs nursing practice plans until contingencies, options priorities, goals, actions, outcomes and timeframes are agreed with the relevant persons

5.3 documents, evaluates and modifies plans accordingly to facilitate the agreed outcomes

5.4 plans and negotiates how practice will be evaluated and the time frame of engagement, and

5.5 coordinates resources effectively and efficiently for planned actions.

Standard 6: Provides safe, appropriate and responsive quality nursing practice

6.1 provides comprehensive safe, quality practice to achieve agreed goals and outcomes that are responsive to the nursing needs of people

6.2 practises within their scope of practice

6.3 appropriately delegates aspects of practice to enrolled nurses and others, according to enrolled nurse's scope of practice or others' clinical or non-clinical roles

6.4 provides effective timely direction and supervision to ensure that delegated practice is safe and correct

6.5 practises in accordance with relevant policies, guidelines, standards, regulations and legislation, and

6.6 uses the appropriate processes to identify and report potential and actual risk related system issues and where practice may be below the expected standards.

Standard 7: Evaluates outcomes to inform nursing practice

7.1 evaluates and monitors progress towards the expected goals and outcomes

7.2 revises the plan based on the evaluation, and

7.3 determines, documents and communicates further priorities, goals and outcomes with the relevant persons.

## Alignment of Learning Outcomes, Assessment and Graduate Attributes



### Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes				
	1	2	3	4	5
1 - Knowledge	○	○	○	○	○
2 - Communication		○			○
3 - Cognitive, technical and creative skills	○			○	○
4 - Research	○		○	○	○
5 - Self-management					○
6 - Ethical and Professional Responsibility		○			○
7 - Leadership				○	○
8 - Aboriginal and Torres Strait Islander Cultures					

### Alignment of Assessment Tasks to Graduate Attributes

Assessment Tasks	Graduate Attributes							
	1	2	3	4	5	6	7	8
1 - Written Assessment - 0%	○		○	○			○	
2 - Online Test - 0%	○			○				
3 - On-campus Activity - 0%	○	○	○	○		○		
4 - Professional Practice Placement - 0%	○	○		○	○	○	○	

## 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)
- Zoom capacity (web cam and microphone)

## Referencing Style

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

For further information, see the Assessment Tasks.

## Teaching Contacts

**Simone Ohlin** Unit Coordinator

[s.ohlin@cqu.edu.au](mailto:s.ohlin@cqu.edu.au)

**Felicity Earl** Unit Coordinator

[f.earl@cqu.edu.au](mailto:f.earl@cqu.edu.au)

## Schedule

### Week 1 - 15 Jul 2019

Module/Topic	Chapter	Events and Submissions/Topic
This week we will review clinical reasoning, the general adult and child assessment and general principles of documentation and clinical handover.	Please refer to: <ul style="list-style-type: none"><li>• '1. Clinical Reasoning &amp; Ngarlu'</li><li>• '2. Assessment of Adults and Children - An Overview'</li><li>• '3. Documentation and Hand Over'</li></ul> In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.	Read all the orientation materials (if you have not done so already). Learn how to use <a href="#">Zoom</a> for tutorials Double check online Tutorial Times Introduce yourself to the class on the activity forum <u>Also, please be aware of the following:</u> <ol style="list-style-type: none"><li>1. Due date for pre-Work Integrated Learning checks</li><li>2. Uniform requirements for Residential School and Clinical Placement (blue collar)</li><li>3. Purchase ID badge for Residential School and Clinical Placement</li></ol>

### Week 2 - 22 Jul 2019

Module/Topic	Chapter	Events and Submissions/Topic
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This week we will explore infant anatomy & physiology as well as the infant health assessment. You will consider nursing interventions employed with infants including medication administration. We will also explore the NSQHS standards as they apply to infection control and patient identification.

Please refer to:

- '1: Hand Hygiene, Patient Identification and Procedure Mapping'
- '2. Clinical Reasoning'
- '3. Medication and Pharmacology'
- '4. Collecting Specimens & Interpreting Results'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

**Pre-WIL checks are due next week.**

Double check online Tutorial Times (please see Moodle for more information).

Please ensure all learning has been completed for the week prior to attending the Tutorial.

**Week 3 - 29 Jul 2019**

**Module/Topic**

This week we will explore the physiology of the child and the child health assessment with a particular focus on asthma. We will also review the identification and response to "at risk" children. We will build on our knowledge of infection control to consider the different types of precautions and corresponding PPE equipment.

**Chapter**

Please refer to:

- Asthma review and refresher
- 'Lesson 1: Infection Prevention and Control and Child Protection'
- 'Lesson 2: Clinical Reasoning'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

**Events and Submissions/Topic**

**Pre-WIL checks due this week.**

Double check online Tutorial Times (please see Moodle for more information).

Please ensure all learning has been completed for the week prior to attending the Tutorial.

**Week 4 - 05 Aug 2019**

**Module/Topic**

This week is a continuation of week 3.

**Chapter**

Please refer to:

- '3. Medication and Pharmacology'
- '4. Collecting Specimens & Interpreting Results'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

**Events and Submissions/Topic**

**Census date is the 6th August. This is the last day to withdraw from NURS20162 without financial or academic penalty.**

Double check online Tutorial Times (please see Moodle for more information).

Please ensure all learning has been completed for the week prior to attending the Tutorial.

**Week 5 - 12 Aug 2019**

**Module/Topic**

This week we will review the anatomy and physiology of the adolescent with special consideration to mental health. We will continue to build upon our understanding of infection control to investigate Aseptic Non-Touch Technique.

**Chapter**

Please refer to:

- '1. Refugee and Mental Health Review and Refresher'
- '2. Aseptic Non-Touch Technique'
- '3. Clinical Reasoning Cycle'
- '4. Medication and Pharmacology'
- '5. Collecting Specimens and Interpreting Results'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

**Events and Submissions/Topic**

Double check online Tutorial Times (please see Moodle for more information).

Please ensure all learning has been completed for the week prior to attending the Tutorial.

**Assessment 1 - Clinical reasoning**

Due: Week 5 Monday (12 Aug 2019) 5:00 pm AEST

**Vacation Week - 19 Aug 2019**

**Module/Topic**

There is no learning scheduled for this week

**Chapter**

There are no resources available for this week

**Events and Submissions/Topic**

Enjoy a well-earned rest.

**Week 6 - 26 Aug 2019**

**Module/Topic**

**Chapter**

**Events and Submissions/Topic**

Over the next two weeks, we will consider the health assessment of the adult paying particular attention to cancer care, pain management and palliation. We will also review the acute resuscitation plan.

Please refer to:

- '1. Cancer Review and Refresher'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

Double check online Tutorial Times (please see Moodle for more information). Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 7 - 02 Sep 2019

#### Module/Topic

This week is a continuation of week 6.

#### Chapter

Please refer to:

- '2. Clinical Reasoning Cycle'
- '3. Palliative Care & the Acute Resuscitation Plan'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

#### Events and Submissions/Topic

Double check online Tutorial Times (please see Moodle for more information). Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 8 - 09 Sep 2019

#### Module/Topic

Pregnancy is a time of change for women and families. This unit will review and build upon your knowledge of the physiological and psychosocial changes which occur during pregnancy. Not all pregnancies end in a live birth and this module will also consider the nursing implications for a woman presenting with miscarriage or requesting a termination of pregnancy.

#### Chapter

Please refer to:

- '1. Pregnancy, Miscarriage & Termination Review & Refresher'
- '2. Clinical Reasoning Cycle'
- '3. Medication and Pharmacology'
- '4. Collecting Specimens and Interpreting Results'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

#### Events and Submissions/Topic

Double check online Tutorial Times (please see Moodle for more information). Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 9 - 16 Sep 2019

#### Module/Topic

Elderly people have the right to live meaningful and fulfilling lives and have their basic rights (including healthcare) met. Nonetheless, this time of life can come with its challenges as physical body changes with the ageing process. In this module, we will consider these physiological changes with a focus on chronic disease.

#### Chapter

Please refer to:

- 1. Chronic Disease Review and Refresher
- '2. Clinical Reasoning Cycle'
- '3. Medication and Pharmacology'
- '4. Collecting Specimens and Interpreting Results'

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

#### Events and Submissions/Topic

Double check online Tutorial Times (please see Moodle for more information). Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 10 - 23 Sep 2019

#### Module/Topic

#### Chapter

#### Events and Submissions/Topic



This week is a continuation of week 9.

Please refer to:  
 1. Wound care Review and Refresher  
 2. Medication and Pharmacology  
 3. Collecting Specimens and Interpreting Results

In an effort to reduce the cost to students, there is no textbook associated with this Unit. In the event that a free, online resource link does not work, please let the Unit Coordinator know.

Double check online Tutorial Times (please see Moodle for more information).  
 Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 11 - 30 Sep 2019

Module/Topic	Chapter	Events and Submissions/Topic
Review, refresh and finalise arrangements for Residential School.	No reading for this week.	Double check online Tutorial Times (please see Moodle for more information). Please ensure all learning has been completed for the week prior to attending the Tutorial.

### Week 12 - 07 Oct 2019

Module/Topic	Chapter	Events and Submissions/Topic
Residential School, Cairns		<ul style="list-style-type: none"> <li>• Ensure that you adhere to the uniform requirements.</li> <li>• Ensure that you are wearing your student badge.</li> </ul> <p><b>Assessment 2 - Medsafe online medication calculation test</b> Due: Week 12 Monday (7 Oct 2019) 9:00 am AEST  <b>Assessment 3 - Residential School Assessment</b> Due: Week 12 Friday (11 Oct 2019) 5:00 pm AEST</p>

### Review/Exam Week - 14 Oct 2019

Module/Topic	Chapter	Events and Submissions/Topic
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### Exam Week - 21 Oct 2019

Module/Topic	Chapter	Events and Submissions/Topic
Work Integrated Learning (WIL): Students will commence clinical placement after Residential School. Not all placements will commence in week 12. Placement dates will be released after Census date. Students who do not have their pre-WIL checks completed by the cut-off date cannot go on placement.		<ul style="list-style-type: none"> <li>• Ensure that you adhere to the uniform requirements.</li> <li>• Ensure that you are wearing your student badge.</li> <li>• Ensure that you carry your pre-WIL checks with you on clinical placement. These can be requested by the facility.</li> </ul> <p><b>Assessment 4 - Work Integrated Learning (Clinical placement)</b> Due: Exam Week Friday (25 Oct 2019) 11:59 pm AEST</p>

## Assessment Tasks

### 1 Assessment 1 - Clinical reasoning

**Assessment Type**  
Written Assessment

**Task Description**

Due Date: Monday 12<sup>th</sup> August, 1700 AEST

**Weight:** Pass/Fail (students must pass this assessment to complete the unit)

**Length:** 2700 words + uploaded charts

*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. It includes in-text references and direct quotations.*

**Referencing Style:** APA 6<sup>th</sup> Edition

**Format:**

- Size 12 font (Times New Roman or Arial)
- 1.5 spacing
- 2.54cm margins
- Page numbers, name and student number on each page

**Learning Outcomes:**

- Construct and adapt an evidence-informed and culturally safe nursing care plan based on patient assessment data with consideration of Aboriginal and Torres Strait Islander peoples and other culturally or linguistically diverse backgrounds
- Communicate with patients, families and healthcare teams, adhering to legal and professional standards. Identify processes to escalate parent/guardian health care concerns.
- Evaluate medications used in Australia and their uses in different client groups
- Prioritise and plan the safe administration of medications to a variety of patients

**Overview**

In the context of a clinical scenario, this assessment will provide you the opportunity to demonstrate your ability to analyse a complex situation, synthesise information and prioritise nursing care.

This assessment will also provide you the opportunity to demonstrate your ability to complete nursing documentation.

This assessment consists of 3 components:

**Clinical Reasoning****Medication management and safety****Nursing Documentation**

Each component has multiple steps within.

**Patient scenario and assessment findings:**

Time: 0630hrs

Scenario: Martha Berry

Sex: Female

Date of Birth: 15 May 2016

Address: 6 Maypark Street, Mareeba, QLD, 4880

Patient Identifier: MAR45913

Martha is a 3 year, 3 month old Aboriginal girl who has been brought in by her mother, Beatrice and father, Mark to the emergency department at a rural hospital.

Mark reports that Martha has been complaining of a sore abdomen for the past 12 hours. She has been reluctant to eat and drink for the past 24 hours and a bit "unsettled". This morning they

have noticed that she felt hot on the forehead and that she has been going to the toilet often and passing smelly urine. They last gave her paracetamol at 0400 but with no improvement so brought her to hospital.

On enquiry you find out that Martha enjoys colouring and attends day care three times a week. She has a history of croup as a baby but otherwise no medical history of note. She is allergic to pawpaw and penicillin. She lives with her mum and dad and two other older siblings in a three bedroom housing commission home. Martha is toilet trained.

Physical assessment reflects the following...

Weight: 15kgs

Height: 95cm

- Respiratory rate (RR) - 32 breaths per minute
- Oxygen saturations (SaO<sub>2</sub>) - 96% on room air
- Temperature (T) - 39.1°C taken aurally.
- Heart rate (HR) - 142 beats/minute
- Blood pressure (BP) - 95/62
- Capillary refill time is >2 seconds
- Blood sugar level (BSL) - 5.5mmol/L
- Pupils are equal and reactive to light (PEARL) - size 4
- Follows directions
- Dry oral mucosa
- She points to the frowning face on the CEWT chart when you ask her how much pain she is in.

As yet, no medications have been ordered for Martha.

### **Clinical Reasoning - 1600 words**

#### **Step 1** - (Clinical Reasoning Cycle)

Using resources you have come across in this unit, work through the eight (8) steps of the clinical reasoning cycle for this presentation. Please indicate what you will take into consideration when synthesising/evaluating this information and your nursing care considerations for each of those nursing actions.

You should use a separate heading for each of the Clinical Reasoning Cycle Steps.

Reference your sources of information (i.e., The Primary Care Clinical Manual).

#### **Step 2** (Children's Early Warning Tool/pain scale).

Complete the appropriate Children's Early Warning Tool (CEWT) and any other clinical observation forms you feel are warranted with the above information.

#### **Step 3** (Handover - 300 words maximum)

You decide to relay this information to the paediatric registrar by phone. Initially write, and then record a verbal ISOBAR handover that you will use to transfer this information and seek assistance. Record as a digital file e.g. mp3 (Max file size 20MB).

### **Medication management and safety - 400 words**

#### **Scenario update:**

Over the phone, the doctor (Dr Kay Jeffries) orders the following:

IV 0.9% Sodium Chloride bolus of 15mls/kg

IV Gentamycin 7.5mg/kg stat

IV Ampicillin 50mg/kg stat and thereafter every 6 hours

Paracetamol 15mg/kg, orally every 6 hours

Ibuprofen 15mg/kg orally stat

The doctor advises you that she will be there in 30 minutes to review Martha.

An experienced nursing colleague who has cannulation endorsement has placed a 20G cannula into Martha's L) cubital Fossa:

### **Step 1**

Document this in the appropriate section of the Paediatric Medication Chart and on the Fluid Chart (you may assume that another nurse has heard this order).

### **Step 2**

Based on your nursing assessment, prioritise the order in which you would give these medications (provide a brief justification for your prioritisation).

### **Step 3**

Calculate the appropriate medication dosages based on Justin's weight. Show your working calculations in your submission.

### **Step 4**

For IV medication using the Australian Injectables Drug Handbook (AIDH) and the Australian Medicines Handbook (AMH) and assuming that all medication strengths are available:

- select the vial size and dose you would select (e.g., "XX drug comes in a 1g in a 5ml Vial, a 5g in a 10ml vial. For this situation I would choose .... because...")
- The volume and what type of fluid you would use for reconstitution.
- The volume of the reconstitution required.
- The volume you need to dilute this in.
- The time needed to administer.

Please reference the AMH and AIDH in your submission if used.

### **Nursing Documentation - 400 words or less**

Step 1. Write contemporaneous nursing notes, using SOAPIE format for this scenario adhering to the legal principles of documentation.

Step 2. Outline the advice you would give to a parent/guardian who feels their child is deteriorating and their health care concerns are not being acknowledged by the treating team.

### **Upload directions**

Congratulations on completing your first assessment!

Please be sure to follow the directions below in regard to the formats required to upload your assessment.

1. Individually upload the CEWT (PDF) and Medication Chart (PDF).
2. Upload the verbal handover in an mp3 format
3. The Clinical Reasoning, Medication management and safety and Nursing documentation components need

to be submitted/uploaded as one docx document. Ensure this document has a cover page. I suggest that each section begins on a new page with a clear heading.

**Assessment Due Date**

Week 5 Monday (12 Aug 2019) 5:00 pm AEST

Time should be factored in for uploading and troubleshooting technology

**Return Date to Students**

Week 8 Monday (9 Sept 2019)

**Weighting**

Pass/Fail

**Minimum mark or grade**

You must pass each part in order to successfully pass this assessment. Students who make a reasonable attempt for each part, but are yet to be successful, will be offered a second attempt opportunity.

**Assessment Criteria**

Learning Outcome	Specific Content	Pass	Fail
<b>Part A</b>			
Construct and adapt an evidence-informed and culturally safe nursing care plan based on patient assessment data with consideration of Aboriginal and Torres Strait Islander peoples and other culturally or linguistically diverse backgrounds	1. Clinical Reasoning Cycle	<ul style="list-style-type: none"> <li>a. Explanation and adaptation of clinical reasoning cycle to this scenario</li> <li>b. Nursing decisions and activities are correct and well justified</li> <li>c. Student selects nursing activities that are within their scope of practice</li> </ul>	<ul style="list-style-type: none"> <li>a. Poor or no explanation and adaptation of clinical reasoning cycle to this scenario. Nursing decisions and activities are absent or incorrect and not justified. Student selects nursing activities which are outside of their scope of practice.</li> </ul>
	2. Children’s Early Warning Tool (CEWT)	<ul style="list-style-type: none"> <li>a. Correct Children’s Early Warning Tool is selected</li> <li>b. Tool is complete with no information missing from any page</li> <li>c. Vital signs have been documented correctly. Correct CEWT score has been derived</li> <li>d. Interventions sections of the chart has been completed correctly in both sections</li> <li>e. Pain assessment has been filled in completely and correctly</li> </ul>	<ul style="list-style-type: none"> <li>a. Incorrect or no Children’s Early Warning</li> <li>b. No tool is selected or more than 5 errors are made.</li> <li>c. Vital signs have been documented incorrectly. Incorrect CWET score has been derived.</li> <li>d. Interventions section of the chart has been completed incorrectly or incompletely.</li> <li>e. Pain assessment is documented incorrectly</li> </ul>
	3. ISOBAR Handover	<ul style="list-style-type: none"> <li>a. Sound adaptation of ISOBAR for the scenario. Handover is clear and concise</li> </ul>	<ul style="list-style-type: none"> <li>a. Poor or no adaptation of ISOBAR for the scenario. Handover is not clear or concise or is not present.</li> </ul>
	4. Nursing Documentation	<ul style="list-style-type: none"> <li>a. Clear and concise nursing notes that follow a recognised format (e.g. SOAPIE)</li> <li>b. Nursing notes adhere to the legal principles of Documentation</li> <li>c. Clear and concise education given to parent/guardian on escalation of health concerns</li> </ul>	<ul style="list-style-type: none"> <li>a. Absent or neither clear nor concise nursing notes.</li> <li>b. No recognised format followed. Nursing notes do not adhere to the legal principles of documentation.</li> </ul>
Communicate with patients, families and healthcare teams, adhering to legal and professional standards			

<b>Part B</b>			
Medication safety. Evaluate medications used in Australia and their uses in different client groups	1. Australian Medication Handbook, Children's Dosage Companion and Australian Injectable Drug Handbook monographs	a. Correct monographs have been selected to inform medication preparation and administration b. Vial size, reconstitution, reconstitution fluid and volume and administration time are correct	a. Incorrect monographs have been selected to inform medication preparation and administration. b. Vial size, reconstitution, reconstitution fluid and volume and administration time are incorrect.
Prioritise and plan the safe administration of medications to a variety of patients	1. Medication prioritisation	a. Order of medication administration is explained and correctly justified in consideration of pharmacodynamics/kinetics and physical assessment	a. Order of medication administration is not well explained or justified
	2. Medication/Fluid charting (phone orders)	a. Correct Medication/Fluid Chart is selected b. Medication is written in the correct location of the medication chart c. Chart has been filled in completely and correctly d. Body Surface Area has been correctly calculated and documented	a. Incorrect or no medication/fluid chart is selected. b. Medications are not written in the correct location of the medication chart. c. Medication chart is incomplete. d. Body Surface has not been calculated correctly.
	3. Medication calculation	a. Medication dose has been correctly calculated, all working-out is demonstrated	a. Medication dose has been incorrectly calculated
<b>Part C</b>			
Nursing Notes	Nursing Documentation	d. Clear and concise nursing notes that follow a recognised format (e.g. SOAPIE) e. Nursing notes adhere to the legal principles of Documentation Clear and concise education given to parent/guardian on escalation of health concerns	d. Absent or neither clear nor concise nursing notes. e. No recognised format followed. Nursing notes do not adhere to the legal principles of documentation. Absent or neither clear nor concise education given to parent/guardian on escalation of health concerns.

## Referencing Style

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

## Submission

Online

### Submission Instructions

Individually upload the CEWT (PDF) and Medication Chart (PDF). Upload handover as an mp3 file. Clinical reasoning cycle, medication safety and nursing notes may be submitted as one document (docx).

## Learning Outcomes Assessed

- Construct and adapt an evidence informed and culturally safe nursing care plan based on patient assessment data with consideration of Aboriginal and Torres Strait Islander peoples and other culturally or linguistically diverse backgrounds
- Communicate with patients, families and healthcare teams, adhering to legal and professional standards
- Evaluate medications used in Australia and their uses in different client groups
- Prioritise and plan the safe administration of medications to a variety of patients

## Graduate Attributes

- Knowledge
- Cognitive, technical and creative skills
- Research
- Leadership

## 2 Assessment 2 - Medsafe online medication calculation test

### Assessment Type

Online Test

### Task Description

During Residential School you will undertake a medication calculation quiz. This quiz will be done online using a computer program called Medsafe.

You may bring calculators and any mathematical formulae that you feel you may require.

The one-hour calculation quiz will comprise of 20 questions.

You must achieve 100% to pass this quiz. You have 3 attempts to achieve 100%

### Assessment Due Date

Week 12 Monday (7 Oct 2019) 9:00 am AEST

### Return Date to Students

Week 12 Friday (11 Oct 2019)

### Weighting

Pass/Fail

### Minimum mark or grade

100% required in order to pass assessment

### Assessment Criteria

Student Name:	Assessor Name:	
Student Number:	Date:	
Assessment Criteria:		
Complete a 20-question pre-set quiz over 1 hour		
Pass Criteria	Achieved	Not Achieved
100% from a 20-question pre-set quiz		
Attempt One		
Attempt Two		
Attempt Three		

### Referencing Style

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

### Submission

Online

### Submission Instructions

Students are required to upload med safe successful completion certificate in pdf form to moodle.

### Learning Outcomes Assessed

- Evaluate medications used in Australia and their uses in different client groups

### Graduate Attributes

- Knowledge
- Research

### 3 Assessment 3 - Residential School Assessment

#### Assessment Type

On-campus Activity

#### Task Description

Throughout the Residential School you will take part in a range of activities. These activities will vary in complexity and will relate to patient scenarios you have been introduced to throughout the Unit.

You will undertake the activities following a review, practice and consolidation of the scenarios. After you complete the activities you will undertake a self-assessment, which will be reviewed by the your lecturer.

The assessment will be formative and summative in nature. This means that you are given the opportunity to improve throughout your learning.

#### 1. Explicit Criteria and Standards

This assessment tool has been developed in alignment with the Nursing and Midwifery Board of Australia, Registered Nurse Standards for Practice.

1. Thinks critically and analyses nursing practice
2. Engages in therapeutic and professional relationships
3. Maintains the capability for practice
4. Comprehensively conducts assessments
5. Develops a plan for nursing practice
6. Provides safe, appropriate nursing practice
7. Evaluates outcomes to inform nursing practice

Each item is also linked to one or more of the 8 NSQHS standards.

1. Clinical Governance
2. Partnering with Consumers
3. Preventing and Controlling Healthcare-Associated Infection
4. Medication Safety
5. Comprehensive Care
6. Communicating for Safety
7. Blood Management
8. Recognising and Responding to Acute Deterioration

#### 2. Active engagement with criteria and standards by student

The formative assessment item requires you **first** to think about these standards before you undertake the activity. **Next** you perform the clinical learning activity. **Then** you reflect on and evaluate your performance. Consider what you have done well, what your knowledge/practice gaps are and what you will do in the coming days to bridge this gap. **Finally** your lecturer will provide you with feedback and an evaluation of how well you have performed using a grading scale.

Guidance will be given as to how your performance can be improved. It is important that you actively engage with this feedback prior to the summative assessment.

The summative assessment, like the formative, requires you to reflect and evaluate your performance, identify your strengths and knowledge/practice gaps and what you will do in clinical placement to bridge this gap. Your lecturer will provide you with a final evaluation and guidance regarding your suitability for clinical placement.

If your performance in the domains is not yet satisfactory, you may either be commenced on a learning support plan or prevented from attending clinical placement. This is at the discretion of your lecturer and the Head of Course.





· Learner establishes professional boundaries and communicates respectfully and effectively with their classmates, teachers and others involved in the Residential School.

What have I done well?

**1 2 3 4 5**  
**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

**Standard 3: Maintains the Capability for Practice**

· Learner considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice (e.g. comes to class well rested, takes lunch breaks)  
· Learner provides information and education required to enhance people's control over health  
· Learner accepts accountability for their decision, actions, behaviours and responsibilities inside of the classroom

What have I done well?

**1 2 3 4 5**  
**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

**Standard 4: Comprehensively Conducts Assessments**

- Learner conducts assessments that are holistic as well as culturally appropriate
- \*Learner uses a range of assessment techniques to systematically collect relevant and accurate information and data to inform practice (e.g. QADDs, Mental Health Assessment, pains assessment)
- \*Learner calculates, prepares and checks medications correctly.

What have I done well?

**1 2 3 4 5**

**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

**Standard 5: Develops a plan for nursing practice**

- Learner uses assessment data and best available evidence to develop a plan
- Learner documents, evaluates and modifies plans accordingly to facilitate the agreed outcomes
- Learner coordinates resources effectively and efficiently for planned actions.

What have I done well?

**1 2 3 4 5**

**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

**Standard 6: Provides safe, appropriate and responsive quality nursing practice**

· \*Learner provides comprehensive safe, quality practice to achieve agreed goals and outcomes that are responsive to the nursing needs of people (e.g. patient identification, procedure mapping, 5 moments of hand hygiene, ANTT).

· \*Learner practises within their scope of practice

· \*Learner demonstrates the safe and timely administration of medications adhering to the 6 rights of medication administration and the principles described in Standard 4 NSQHS

· \*Learner consults the Australian Medication Handbook and the Australian Injectable Drug Handbook, for guidance on medication administration.

What have I done well?

**1 2 3 4 5**

**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

#### **Standard 7: Evaluates outcomes to inform nursing practice**

· Learner evaluates and monitors progress towards the expected goals and outcomes

· Learner revises the plan based on the evaluation

· Learner determines, documents and communicates further priorities, goals and outcomes with the relevant persons.

What have I done well?

**1 2 3 4 5**

**Comment:**

What are my knowledge/practice gaps?

How will I bridge this gap?

### **Referencing Style**

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

### **Submission**

Online

### **Submission Instructions**

Please upload these assessment items to moodle within 3 days of completing your residential

### **Learning Outcomes Assessed**

- Construct and adapt an evidence informed and culturally safe nursing care plan based on patient assessment data with consideration of Aboriginal and Torres Strait Islander peoples and other culturally or linguistically diverse backgrounds

### **Graduate Attributes**

- Knowledge

- Communication
- Cognitive, technical and creative skills
- Research
- Ethical and Professional Responsibility

## 4 Assessment 4 - Work Integrated Learning (Clinical placement)

### Assessment Type

Professional Practice Placement

### Task Description

**Length:** 160 hours of Work Integrated Learning (Clinical Placement)

### Learning Outcomes Assessed:

1. Communicate with patients, families and healthcare teams, adhering to legal and professional standards.
2. Prioritise and plan the safe administration of medications to a variety of patients.
3. Apply the Nursing and Midwifery Board of Australia's Registered Nurse Standards for Practice in the safe and effective care of individuals, families and the community whilst in the industry based learning environment.

### Graduate Outcomes Assessed:

- Knowledge: Acquire and apply a body of knowledge and appropriate professional judgment relevant to a discipline.
- Communication: Communicate and interact with others and in culturally diverse contexts
- Ethical and Professional Responsibility: Demonstrate ethical, legal, social and civic responsibility.
- Cognitive, technical and creative skills: Investigate, analyse and synthesise complex information, problems and concepts.
- Research: Critically appraise outcomes and products of research for translation into the discipline.
- Leadership: Exercise initiative and responsibility, taking action and engaging others to make a positive difference as a global citizen.
- Self-management: Reflect on and critically evaluate one's performance.

### The Tasks

After Residential School, you will be ready to commence Work Integrated Learning. This is a 160-hour clinical placement, undertaken in one clinical setting. You have two assessment items which you must undertake while on placement.

### Task A

Throughout your placement, you must keep a daily reflective journal. This is an opportunity for you to reflect on the nursing care you have delivered during the shift, work through the decisions you made and consider if you would act in the same way again, and link theory to practice. Please consider the NMBA Registered Nurse Standards for Practice and how they relate to your journal entries as you will need this in Task B.

### Task B

Using your journal reflections as evidence of your practice, you will undertake a performance review with a clinical supervisor. The clinical supervisor will evaluate your ability to demonstrate how your ability to meet the NMBA Registered Nurse Standard for Practice. You will be assessed twice; formative assessment occurs at 80 hours and summative assessment occurs at 160 hours.

### Assessment Due Date

Exam Week Friday (25 Oct 2019) 11:59 pm AEST  
Upon completion of clinical placement

### Return Date to Students

Exam Week Friday (25 Oct 2019)

### Weighting

Pass/Fail

### Minimum mark or grade

Pass

### Assessment Criteria

Please see the ANSAT (formative and summative assessments) located in the work integrated learning booklet

### Referencing Style

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

### Submission

Online

### **Submission Instructions**

Please upload within 3 working days after the completion of your clinical placement

### **Learning Outcomes Assessed**

- Communicate with patients, families and healthcare teams, adhering to legal and professional standards
- Prioritise and plan the safe administration of medications to a variety of patients
- Apply the Nursing and Midwifery Board of Australia's Registered Nurse Standards for Practice in the safe and effective care of individuals, families and the community whilst in the industry based learning context.

### **Graduate Attributes**

- Knowledge
- Communication
- Research
- Self-management
- Ethical and Professional Responsibility
- Leadership

## Academic Integrity Statement

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

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

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

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

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

### **What is a breach of academic integrity?**

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

### **Why is academic integrity important?**

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

### **Where can I get assistance?**

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

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



**Be Honest**

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



**Seek Help**

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



**Produce Original Work**

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