



# NURS20164 Australian Clinical Nursing Practice

## Term 1 - 2018

Profile information current as at 05/05/2024 12:20 pm

All details in this unit profile for NURS20164 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

This unit will provide you with advanced knowledge and skills in nursing assessment and care planning in the Australian context. 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. Through research and analysis of practice and policy documents, you are encouraged to evaluate the safety and sensitivity of early warning systems and health assessment instruments. You will consider best practice implications for medication administration, wound care and contemporary nursing practice. This unit incorporates a five-day residential school and 240 hours of industry based learning. This will allow you to demonstrate responsible nursing practice under the supervision of a nurse registered with the Australian Health Practitioner Regulation Agency.

### 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

Pre-requisites - NURS20163 Australian Identity and Nursing Care and NURS20160 The Nurse Professional Students may be referred to the Head of Course to undertake all three units in one semester. This will be negotiated on a case-by-case basis. Students must be enrolled in Graduate Certificate in Nursing (International Registered Nurse 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 1 - 2018

- Cairns
- Distance

### Attendance Requirements

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

### 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. **Practical and Written Assessment**

Weighting: 30%

#### 2. **Practical Assessment**

Weighting: 20%

#### 3. **Professional Practice Placement**

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 [University's Grades and Results Policy](#) for more details of interim results and final grades.

## CQUniversity Policies

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

You may wish to view these policies:

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

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

## Unit Learning Outcomes

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

1. Construct an evidence-informed and culturally safe nursing care plan based on patient assessment data
2. Communicate effectively with patients, families and healthcare teams, while 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 clients
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.

The unit learning outcomes are linked to the following Nursing and Midwifery Board of Australia's "Registered Nurses Standards for Practice":

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.



## 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)
- Microphone headset and web camera for online activities (distance education students)

## 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

**Lydia Mainey** Unit Coordinator

[l.mainey@cqu.edu.au](mailto:l.mainey@cqu.edu.au)

## Schedule

### Week 1 - 05 Mar 2018

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.	<b>Tutorial 1</b> Also, please be aware of the following: <ol style="list-style-type: none"><li>1. The due date for clinical placement 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 - 12 Mar 2018

Module/Topic	Chapter	Events and Submissions/Topic
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: <ul style="list-style-type: none"><li>• '1: Hand Hygiene, Patient Identification and Procedure Mapping'</li><li>• '2. Clinical Reasoning'</li><li>• '3. Medication and Pharmacology'</li><li>• '4. Collecting Specimens &amp; Interpreting Results'</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.	<b>Tutorial 2</b>

**Week 3 - 19 Mar 2018**

Module/Topic	Chapter	Events and Submissions/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.	Please refer to: <ul style="list-style-type: none"> <li>• 1. Asthma review and refresher</li> <li>• '2: Infection Prevention and Control and Child Protection'</li> <li>• '3: Clinical Reasoning'</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.	<b>Tutorial 3</b>

**Week 4 - 26 Mar 2018**

Module/Topic	Chapter	Events and Submissions/Topic
This week is a continuation of week 3.	Please refer to: <ul style="list-style-type: none"> <li>• '3. Medication and Pharmacology'</li> <li>• '4. Collecting Specimens &amp; Interpreting Results'</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.	<b>Tutorial 4</b>

**Week 5 - 02 Apr 2018**

Module/Topic	Chapter	Events and Submissions/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.	Please refer to: <ul style="list-style-type: none"> <li>• '1. Refugee and Mental Health Review and Refresher'</li> <li>• '2. Aseptic Non-Touch Technique'</li> <li>• '3. Clinical Reasoning Cycle'</li> <li>• '4. Medication and Pharmacology'</li> <li>• '5. Collecting Specimens and Interpreting Results'</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.	<b>Tutorial 5</b>

**Vacation Week - 09 Apr 2018**

Module/Topic	Chapter	Events and Submissions/Topic
There is no learning scheduled for this week.	There are no resources available for this week.	

**Week 6 - 16 Apr 2018**

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: <ul style="list-style-type: none"> <li>• '1. Cancer Review and Refresher'</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.	<b>Tutorial 6</b>

**Week 7 - 23 Apr 2018**

Module/Topic	Chapter	Events and Submissions/Topic

This week is a continuation of week 6.

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.

**Tutorial 7**

Due: Week 7 Monday (23 Apr 2018) 5:00 pm AEST

### Week 8 - 30 Apr 2018

Module/Topic	Chapter	Events and Submissions/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.	Please refer to: <ul style="list-style-type: none"> <li>• '1. Pregnancy, Miscarriage &amp; Termination Review &amp; Refresher'</li> <li>• '2. Clinical Reasoning Cycle'</li> <li>• '3. Medication and Pharmacology'</li> <li>• '4. Collecting Specimens and Interpreting Results'</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.	<b>Tutorial 8</b>

### Week 9 - 07 May 2018

Module/Topic	Chapter	Events and Submissions/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.	Please refer to: <ul style="list-style-type: none"> <li>• 1. Chronic Disease Review and Refresher</li> <li>• '2. Clinical Reasoning Cycle'</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.	<b>Tutorial 9</b>

### Week 10 - 14 May 2018

Module/Topic	Chapter	Events and Submissions/Topic
This week is a continuation of week 9.	Please refer to: <ul style="list-style-type: none"> <li>• 3. Wound care Review and Refresher</li> <li>• 4. Collecting Specimens and Interpreting Results</li> <li>• 5. Medication and Pharmacology</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.	<b>Tutorial 10</b>

### Week 11 - 21 May 2018

Module/Topic	Chapter	Events and Submissions/Topic
This is a dedicated catch-up week.	There are no resources available for this week	

### Week 12 - 28 May 2018

Module/Topic	Chapter	Events and Submissions/Topic
Residential School, Cairns		

### Review/Exam Week - 04 Jun 2018

Module/Topic	Chapter	Events and Submissions/Topic

**Residential School** Due:  
Review/Exam Week Monday (4 June  
2018) 11:45 pm AEST

**Exam Week - 11 Jun 2018**

Module/Topic	Chapter	Events and Submissions/Topic
		<b>Clinical Placement</b> Due: Exam Week Monday (11 June 2018) 12:00 am AEST

## Assessment Tasks

### No Assessment Title

**Assessment Type**

Practical and Written Assessment

**Task Description**

**Assessment Type**

Written Assessment

**Task Description**

**Assignment 1 Written Assignment**

**Due Date:** Monday, 23 April 2018

**Weight:** 30%

**Length:** 2500 words + uploaded charts

**Referencing Style:** APA 6th Edition Format: APA style

**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**

**1. Knowledge:** Acquire and apply a body of knowledge and appropriate professional judgment relevant to a discipline.

**2. Communication:** Communicate and interact with others and in culturally diverse contexts.

**3. Cognitive, technical and creative skills:** Investigate, analyse and synthesise complex information, problems and concepts.

**4. Research:** Critically appraise outcomes and products of research for translation into the discipline

**5. Self-management:** Reflect on and critically evaluate one's performance

**6. Ethical and Professional Responsibility:** Demonstrate ethical, legal, social and civic responsibility

**Objectives and Outcomes:**

The ability to think critically about a situation and communicate effectively and clearly are two of the most valuable skills a nurse can possess.

It is essential for nurses to follow clear processes, such as the clinical reasoning cycle, to collect patient cues, process the information and come to understand the patient's situation in order to plan, implement and evaluate interventions and reflect on the process (Levett-Jones, 2012, p4).

**The Scenario**

Scenario: Lalah Khalili

Scenario Time: 0300hrs

Scenario Date: 30 March 2018

Lalah was found by the police, wandering the streets at 0200hours. She was verbally aggressive towards the police and was

wielding a large kitchen knife, making wild gestures. The police attempted to de-escalate the situation without force, however, resorted to using a taser (conducted energy device). Lalah was subsequently brought to the hospital in the back of a divisional van where she is under police guard.

Her parents are with her. They are from a culturally and linguistically diverse background and do not speak English very well.

**Lalah's Clinical Observations are:**

Weight: 46kg

Height: 152cm



Lalah has no known drug allergies.

She is awake and very alert. (Pupils are a size 2mm and react, equally, to light. She has equal movement in her arms and legs)

She is yelling and swearing intermittently in her first language.

Her respiratory rate is 22 breaths per minute.

Her oxygen saturation (SpO<sub>2</sub>) is 99% on room air.

Her temperature is 37.2 degrees Celsius

Her heart rate is 140 beats per minute

Her blood pressure is 120/75mmHg

Her capillary refill time is 2 seconds

Her blood sugar level is 5.2mmol/L

When asked if she has pain anywhere she tells you, impolitely to go away.

### **Part A**

Step 1: Essay (Clinical Reasoning) (1600 words)

Considering what you already know about Lalah (from the adolescent health module) and in conjunction with the Primary Clinical Care Manual, work through the eight (8) steps of the clinical reasoning cycle for this assessment.

Please indicate what you will take into consideration when synthesising/evaluating this information and your nursing care considerations for each of those nursing actions.

The essay can be written in first person, academic style. A reference list should be included at the end of the essay. You should review Academic Writing which can be found in the Academic Learning Centre site.

Step 2: CEWT

Complete the appropriate CEWT form, documenting the above information correctly and completely.

Step 3: Handover. (300 words maximum)

Write out the ISOBAR handover that you will give to the doctor on call.

### **Part B (medications)**

(200 words)

The doctor advises you that he is on his way and will be there in 5 minutes. Over the phone, the doctor orders:

Diazepam: 2mg orally

Step 1. Document this in the appropriate section of the Paediatric Medication Chart and Fluid Chart (you may assume that another nurse has heard this order).

Step 2. Use the AMH Children's dosing companion and the Australian's Medicines Handbook to assess the appropriateness of this medication.

### **PART C (Nursing Notes) (400 words)**

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

Important information to assist you in completing this assessment

When completing this assessment you will quickly see that not all the information you may want is available in the scenario.

For example, you may decide to complete an assessment for which I have not given you the answers. When this occurs, explain what you would assess, how you would assess it, and how you would respond to your assessment findings.

#### *Example (abridged):*

Collecting the cues.

A patient with an eye injury requires a visual acuity test. I would do this using the Snellen chart (if the patient was literate or an alternative if not), having the patient standing 6m or 3m away (depending on the chart) in a well-lit room. If the patient has glasses I would test with the glasses on, and make a note of this on the chart. The injured eye would be assessed first, as testing the good eye first can falsely affect the other eye. The patient will read from the top line down until they make multiple errors. I will document the previous line. The testing distance will be documented measuring distance/line reached (e.g. 6/12) for each eye. I will document this in the nursing notes and advise the medical officer.

Processing the information

In this scenario I have decided the patient's visual acuity is L) 6/60 and R) 6/12 (injured eye). This tells me that her vision has been affected. I also note that her eye is watery and swollen which may be contributing to the reduced visual acuity in the right eye.

### **Assessment Due Date**

Week 7 Monday (23 Apr 2018) 5:00 pm AEST

### **Return Date to Students**

Week 9 Monday (7 May 2018)

**Weighting**

30%

**Assessment Criteria**

You will be assessed on:

- CEWT and Medication Chart are used very effectively. The Clinical reasoning cycle has a clear and succinct introduction and conclusion: they introduce the topic and outline the direction of the presentation/bring the presentation to a logical close. Appropriate headings are given to each section of the assignment
- Excellent presentation of assignment, double-spaced with 11 point font. The submitted written material is very well-presented and free from errors.
- Consistently integrates up-to-date references to support and reflect all ideas, factual information and quotations
- Accurate APA referencing. No errors.
- Content is entirely relevant to the topic, the approach comprehensively addresses the task and the presentation proceeds logically and is within the set word count.
- Correct Children's Early Warning Tool is selected. The tool has been filled in completely and correctly.
- Correct Medication Chart is selected. The chart has been filled in completely and correctly. Body Surface Area has been correctly calculated
- Excellent explanation and adaptation of clinical reasoning cycle to this scenario. Nursing decisions and activities are entirely correct and well justified. The student selects nursing activities which are within their scope of practice.
- Excellent adaptation of ISOBAR for the scenario. Handover is clear and concise.
- Correctly selection of medication vial, volume and type of reconstitution fluid, volume of reconstitution required, volume of dilute, duration of administration (if appropriate)
- Clear and concise nursing notes which clearly follow the SOAPIE a format and adhere to the legal principles of documentation.

**Referencing Style**

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

**Submission**

No submission method provided.

**Learning Outcomes Assessed**

- Construct an evidence-informed and culturally safe nursing care plan based on patient assessment data
- Communicate effectively with patients, families and healthcare teams, while adhering to legal and professional standards

**Graduate Attributes**

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

## 2 Residential School

**Assessment Type**

Practical Assessment

**Task Description****Part A**

Length: 1 hour

Learning Outcomes Assessed

- Prioritise and plan the safe administration of medications to a variety of patients

Overview

Medication errors contribute towards serious outcomes for patients. You are required to complete a medication quiz

during residential school. It is a mandatory requirement for all CQUniversity nursing students to obtain 100% on a medication examination prior to going on clinical placement.

#### The Task

The quiz has been informed by the Med+Safe learning packages which you have been referred to throughout your studies.

*You must achieve 100% on this assessment before you are allowed on clinical placement.*

You have a maximum of 3 attempts at this quiz.

#### Items allowed

You may bring a calculator and your math formula into the exam.

### Part B

**Length:** 5 days

Format: Simulation-based learning

Due Date:

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

#### Overview

As a Re-entry student, you are able, under the supervision of a registered nurse, to undertake the full range of care activities that are expected of a registered nurse. The role of Residential School is to refresh your psychomotor skills, to consolidate your CH79 theory and ensure that you are safe to attend clinical practice.

#### Task

Throughout Residential School you will undergo simulation assessment activities. These activities will vary in complexity and acuity.

The simulation assessment activities will relate to patients that you have been introduced to throughout the course.

Simulation assessment activities will be conducted after review, practice and consolidation have occurred.

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

#### Assessment Due Date

Review/Exam Week Monday (4 June 2018) 11:45 pm AEST

Ongoing throughout residential school

#### Return Date to Students

Week 12 Friday (1 June 2018)

At the end of residential school

#### Weighting

20%

#### Minimum mark or grade

Students must achieve 100% on the medication calculation exam.

#### Assessment Criteria

**Part A:** Students must achieve 100% on the medication quiz.

Quiz questions will be sourced from the Med+Safe online learning package which students have been referred to throughout the program.

**Part B:** Broadly you will be assessed on the following domains.

##### Domain 1: Preparation and Time Management

Cue 1. Learner consults Primary Clinical Care Manual for guidance on appropriate clinical assessment and management.

Cue 2. Learner consults a Clinical Skills Manual for preparation, planning and performing nursing procedures.

##### Domain 2: Infection Prevention Control

Cue 1. Learner applies the 5 moments of hand hygiene and infection control principles as described in Standard 3 of the ACSQHC National Safety and Quality Health Service Standards.

Cue 2. Learner selects and applies the appropriate Aseptic Non-touch Technique as describe by ANTT.

##### Domain 2: Patient Identification and Procedure Matching\*

Cue 1. Learner correctly identifies the patient as described in Standard 5 of the ACSQHS National Safety and Quality Health Service Standards.

Cue 2. Learner correctly carries out the correct procedure matching in consideration of the procedure risk.

##### Domain 3: Medication Safety\*

Cue 1. Learner demonstrates safe and timely administration of medications adhering to the “6 rights of medication administration” and the Principles described in Standard 4 NSQHS Standards.

Cue 2. Learner calculates and prepares and checks medications correctly.

Cue 3. Learner adheres to the standards of antimicrobial stewardship when administering antimicrobials and collecting microbiology specimens as described in Standard 3 NSQHS standard.

**Domain 4: Recognition of the Deteriorating Patient\***

Cue 1. Learner evaluates and analyses patient care in a timely manner with a synthesis of prioritisation of patient care (NMBA Standard for Practice 1, 4,5 and NSQHS Standard 9).

Cue 2. Learner assesses and evaluates changes in patient condition and plans appropriate interventions of nursing care (NSQHS, Standard 9)

Cue 3. Learner demonstrates the ability to incorporate the clinical reasoning cycle and patient assessments, where necessary, in planning patient care (NMBA Competency Standard 5)

**Domain 5: Documentation and Communication**

Cue 1. Learner applies legal principles of professional documentation (NMBA Competency Standard 10)

Cue 2. Learner demonstrates knowledge of the ISOBAR communication technique (NSQHS, Standard 6).

Domains marked with an asterisk (\*) are critical domains. Failure to demonstrate competence in these domains may result in failure of the assessment and therefore you will not be able to attend residential school.

**Referencing Style**

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

**Submission**

No submission method provided.

**Learning Outcomes Assessed**

- Construct an evidence-informed and culturally safe nursing care plan based on patient assessment data
- Evaluate medications used in Australia and their uses in different client groups
- Prioritise and plan the safe administration of medications to a variety of clients

**Graduate Attributes**

- Knowledge
- Communication
- Cognitive, technical and creative skills

## 3 Clinical Placement

**Assessment Type**

Professional Practice Placement

**Task Description**

Length: 240 hours clinical-based learning

**Weight:** 50%

Due Date: Within 5 business days of completing clinical placement.

Learning Outcomes Assessed

- 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.

Overview

After successful completion of all theory, students will consolidate their knowledge and skills during 240hours clinical placement. Clinical placement provides a supervised learning experience for students within a work environment and allows nursing students to provide nursing care to real patients/consumers within actual healthcare facilities'.

Task 1

As a student Re-entry nurse, you may undertake, under the supervision of a registered nurse, the full range of care activities that are expected of a registered nurse. The decision about what activities you perform as a student must be guided by:

1. The congruence of the activity to the education program (i.e. CL02), and the professional role they will undertake once registered.

(Practice Direction: clinical placement in this course is designed to be undertaken in one ward. Moving through different hospital wards would not be congruent, and therefore activities may be seen as out of the student's scope of practice).

2. CQUniversity's support of the activity.

(Practice Direction: generally CQUniversity supports CL02 students to undertake the full range of activities covered under the profession's scope of practice provided students follow the healthcare facility's policy and procedures.

However, the person who supervises the student must be competent and confident in carrying out the procedure

themselves).

3. You are competent and confident to perform the specific activity for the consumer in the current context.

(Practice Direction: the way you perform the task/activity should be at the same level as the registered nurse).

You have past education and training outside of this course which should be taken into consideration. In order to accept a delegation from a preceptor, you are instructed to:

1. Verify that the registered nurse buddy/preceptor has conducted a comprehensive assessment of the patient.

2. Verify that the task is within your scope of practice (have you had adequate training throughout your career and is that training current) and in line with local policy.

3. Consider your accountability and responsibility in undertaking the task

4. Consider if your confidence, education, experience and competence are sufficient to safely undertake the task.

Negotiate with their preceptor for education, supervision and support to perform the task OR refer the patient to a more experienced registered nurse to perform the task.

By the end of your 240 hours of clinical placement, you should be confidently and competently managing the nursing activities or caseload for at least four (4) patients (this may vary depending on patient acuity).

Task 2

You will keep a daily reflective journal of each shift that you work. You are encouraged to use the Gibbs Reflective Cycle to write your entries. These journal entries should be uploaded into Moodle each week.

### **Assessment Due Date**

Exam Week Monday (11 June 2018) 12:00 am AEST

Formative ANSAT due after 120 hours of clinical placement; Summative ANSAT due after 240 hours of clinical placement.

### **Return Date to Students**

Feedback will occur within a week of ANSAT submission.

### **Weighting**

50%

### **Assessment Criteria**

#### **Assessment Criteria**

Australian Nursing Standards Assessment Tool

Students will be assessed, by their supervising registered nurse, on their ability to meet the Nursing and Midwifery Board of Australia's "Registered Nurse Standards for Practice".

The assessment tool is called Australian Nursing Standards Assessment Tool (ANSAT) and is available on the NURS20162 Moodle site.

You must achieve a rating of '3' in all domains of the ANSAT by the conclusion of your placement.

Students will undergo formative and summative assessment.

You will undergo formative and summative assessment.

Formative Assessment is a formal assessment conducted halfway through the clinical placement.

Should you fail to pass the formative assessment then the Head of Course (CH79) must be contacted and the option of a Support Plan discussed.

Summative Assessment is a formal assessment conducted at the end of the clinical placement.

If students are at risk of not passing the summative assessment, the Head of Course should be contacted prior to this assessment.

### **Support Plans**

It is essential that you ask your assessor to provide you with feedback early during your placement so that you have ample time to develop the identified skills.

A Support Plan is commenced either at formative assessment or when it has been identified that you have some areas for development in meeting the Nursing and Midwifery Board of Australia (NMBA) Registered Nurse Standard for Practice.

The support plan is developed in consultation with facilitator/ preceptor, Head of Course and yourself.

The Support Plan will outline the deficits and indicate the strategies that you must adhere to in order to improve their knowledge/skills/performance. The learning outcomes must be met within the agreed timeframe stated on the Support Plan

If you cannot meet the learning outcomes of the Support Plan you will not have met the NMBA Registered Nurse Standard for Practice and will, therefore, fail Clinical Placement.

### **Referencing Style**

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

### **Submission**

No submission method provided.

### **Learning Outcomes Assessed**

- 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
- Cognitive, technical and creative skills
- 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